

#### CHILD CARE AND DEVELOPMENT FUND PLAN

**FOR: TENNESSEE** 

#### FFY 2010-2011

This Plan describes the CCDF program to be conducted by the State/Territory for the period 10/1/09 - 9/30/11. As provided for in the applicable statutes and regulations, the Lead Agency has the flexibility to modify this program at any time, including changing the options selected or described herein.

The official text of the applicable laws and regulations govern, and the Lead Agency acknowledges its responsibility to adhere to them regardless of the fact that, for purposes of simplicity and clarity, the specific provisions printed herein are sometimes paraphrases of, or excerpts and incomplete quotations from, the full text.

Public reporting burden for this collection of information is estimated to average 162.5 hours per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

Form ACF 118 Approved OMB Number: [0970-0114] expires [04/30/2012]

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### **AMENDMENTS LOG**

CHILD CARE AND DEVELOPMENT FUND PLAN FOR: TENNESSEE FOR THE PERIOD: 10/1/09 – 9/30/11

Lead Agencies must submit plan amendments within 60 days of the effective date of an amendment (§98.18 (b)).

#### **Instructions for Amendments:**

- 1) Lead Agency completes the first 3 columns of the Amendment Log and sends a photocopy of the Log (showing the latest amendment sent to ACF) <u>and</u> the amended section(s) to the ACF Regional Office contact. Lead Agency also should indicate the Effective Date of the amended section in the footer at the bottom of the amended page(s). A copy of the Log, showing the latest amendment pending in ACF, is retained as part of the Lead Agency's Plan.
- 2) ACF completes column 4 and returns a photocopy of the Log to the grantee.
- 3) The Lead Agency replaces this page in the Plan with the copy of the Log received from ACF showing the approval date.

**Note**: This process depends on repeated subsequent use of the <u>same</u> Log page over the life of the Plan. At any time the Log should reflect all amendments, both approved and pending in ACF. The Lead Agency is advised to retain "old" plan pages that are superseded by amendments in a separate appendix to its Plan. This is especially important as auditors will review CCDF Plans and examine effective date of changes.

SECTION AMENDED	EFFECTIVE/ PROPOSED EFFECTIVE DATE	DATE SUBMITTED TO ACF	DATE APPROVED BY ACF

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Amended Effective	_

# PART 1 ADMINISTRATION

The agency shown below has been designated by the Chief Executive Officer of the State (or Territory), to represent the State (or Territory) as the Lead Agency. The Lead Agency agrees to administer the program in accordance with applicable Federal laws and regulations and the provisions of this Plan, including the assurances and certifications appended hereto. (658D, 658E)

## **1.1 Lead Agency Information** (as designated by State/Territory Chief Executive Officer)

Name of Lead Agency: <u>Tennessee Department of Human Services</u>

Address of Lead Agency: 400 Deaderick Street

Nashville, TN 37243-1403

Name and Title of the Lead

Agency's Chief Executive Officer: <u>Virginia T. Lodge, Commissioner</u>

 Phone Number:
 (615)313-4700

 Fax Number:
 (615)741-4165

 E-Mail Address:
 Gina.Lodge@tn.gov

Web Address for Lead Agency (if any): http://www.state.tn.us/humanserv/Children.html

### 1.2 State Child Care (CCDF) Contact Information (day-to-day contact)

Name of the State/Territory Child Care Contact (CCDF): Barbara West Wall

Title of State/Territory Child Care Contact: <u>Director of Child Care Services</u>

Address: 400 Deaderick Street

Nashville, TN 37243-1403

 Phone Number:
 (615)313-4770

 Fax Number:
 (615)532-9956

 E-Mail Address:
 Barbara.Wall@tn.gov

Phone Number for CCDF program information (for the public) (if any): n/a

Web Address for CCDF program information (for the public) (if any):

http://www.state.tn.us/humanserv/adfam/ccfa.html to "Financial Assistance Child Care Certificate Program" section.

#### 1.3 Estimated Funding

The Lead Agency <u>estimates</u> that the following amounts will be available for child care services and related activities during the 1-year period: October 1, 2009 through September 30, 2010. (§98.13(a))

CCDF: \$114,171,741

Federal TANF Transfer to CCDF: \$54,000,000

Direct Federal TANF Spending on Child Care: \$16,446,000 State CCDF Maintenance of Effort Funds: \$18,975,782

State Matching Funds: \$18,595,892 Total Funds Available: \$222,189,415

#### 1.4 Estimated Administration Cost

The Lead Agency <u>estimates</u> that the following amount (and percentage) of Federal CCDF and State Matching Funds will be used to administer the program (not to exceed 5 percent): \$5,000,000 (2.7 %). (658E(c) (3), §§98.13(a), 98.52)

### 1.5 Administration of the Program

- **1.5.1** Does the Lead Agency directly administer and implement <u>all</u> services, programs and activities funded under the CCDF Act, <u>including</u> those described in Part 5.1 Activities & Services to Improve the Quality and Availability of Child Care, Quality Targeted Funds and Set-Aside?
  - Yes\* and
  - No\*\*. If no, use **Table 1.5.1** below to **identify** the name and type of agency that delivers services and activities. If more than one agency performs the task, identify all agencies in the box under "Agency," and **indicate** in the box to the right whether each is a non-government entity.

**Table 1.5.1: Administration of the Program** 

Service/Activity	Agency	Non-Government Entity (see Guidance for definition)	
Determines individual eligibility:			
a) TANF families	*Lead Agency	Yes	⊠ No
b) Non-TANF families	*Lead Agency	Yes	⊠ No
Assists parents in locating care	*Lead Agency	Yes	⊠ No
	Signal Centers, Child Care Resource & Referral Network Management	⊠ Yes	☐ No
Makes the provider payment	*Lead Agency	Yes	⊠ No
Quality activities	Signal Centers, Child Care Resource & Referral Network Management; Tennessee State University,	⊠ Yes	□ No □ No

Service/Activity	Agency	Non-Governm (see Guidance	nent Entity for definition)
	Tennessee Early Childhood Training Alliance; University of Tennessee, Assessment Training; Family Child Care	☐ Yes	⊠ No
	Alliance, TOPSTAR – Family Child Care Mentoring; University of Tennessee, Child Care Research	⊠ Yes	∐ No
Other:		Yes	□ No

**1.5.2. Describe** how the Lead Agency maintains overall internal control for ensuring that the CCDF program is administered according to the rules established for the program (§98.11).

The Department of Human Services (DHS) administers most of the child care services and quality improvement activities through contractual agreements with universities and community agencies. DHS includes clear performance expectations in its contracts and provides training and technical assistance to contract agencies to ensure maximum compliance and performance outcomes. Regular reporting and routine meetings are required from contract agencies to ensure adherence to the contracted scope of services.

The majority of Tennessee's grant contracts are executed annually through a noncompetitive negotiation process.

The Lead Agency ensures overall administrative control of all activities not administered directly by utilizing its policies and procedures for third party funding. At a minimum, annual monitoring of all contracts, grants, agreements are performed by the Lead Agency according to state and federal regulations.

**1.5.3. Describe** how the Lead Agency ensures adequate personnel, resources, systems, internal controls, and other components necessary for meeting CCDF reporting requirements (658K, §98.67, §§98.70 & 98.71, §§98.100 to 102), including the Lead Agency's plans for addressing any reporting deficiencies, if applicable. <u>At a minimum</u>, the description should address efforts for the following reporting requirements:

#### a) Fiscal Reporting

The Lead Agency has fiscal staff dedicated to the review, payment processing, recording, and reporting of the expenditure of CCDF funds. In addition, there

are also monitoring staff that complete field reviews of child care provider records. Finally, there are audit reports on certain vendors and sub-recipients of CCDF funds that are also reviewed for compliance, according to State and Federal regulations.

Where deficiencies are cited, corrective measures are taken, including sanctions and questioned costs collected and termination from the program in appropriate circumstances.

#### b) Data Reporting

The data utilized to submit the monthly ACF-801 is accumulated through an automated function of the Tennessee Child Care Management System (TCCMS).

The data utilized to submit the ACF-800 is produced by a report generated by TCCMS; manual tabulations are then completed prior to the online submission of the annual report.

The Lead Agency has not been made aware of reporting deficiencies requiring corrective action.

#### c) Error Rate Reporting

The Lead Agency has developed a data collection process, including sample selection and case record reviews, that adheres to all requirements of the "Measuring Improper Authorizations for Payment in the Child Care and Development Fund (CCDF) Program" instructions and regulations at 45 CFR 98 Subpart K. Internally, an Improper Payments Planning Team was established. The team members represent the Child Care Services, Family Assistance Policy, Families First Policy, Families First Services, and Internal Audit units within the Tennessee Department of Human Services. The Project Administrator, the Project Coordinator, and the staff responsible for the Error Rate procedures are with the Internal Audit section.

The record reviews are not conducted by persons who make or approve the eligibility determinations and are not under the supervision of persons responsible for eligibility determinations. The Department of Human Services has developed a training process for all staff completing the case record reviews. The training, led by the Lead Agency's Information Systems staff, focuses on the use of the "Automated Client Certification and Eligibility Network of Tennessee" (ACCENT) and the "Tennessee Child Care Maintenance System (TCCMS), which is where the information needed for the approved Record Review Worksheets is located.

Any cases that do not meet the criteria of the approved Record Review Worksheets are reviewed in detail by the Project Administrator and the Project

Coordinator to determine if there any weaknesses that could be resolved. There were no improper authorizations noted during the 2008 test. However, agency staff will receive additional training to ensure that all information entered on ACCENT and TCCMS is correct.

## 1.6 Funds Used to Match CCDF

<b>1.6.1</b> Will the Lead Agency use <u>public funds</u> to meet a part of the CCDF Match requirement pursuant to §98.53(e)(1)?			
Yes, <b>describe</b> the activity and source of funds:			
State funds are used to meet part of the CCDF Match requirement above the MOE requirement. This includes participation in the subsidized child care, as well as pre-K expenditures which are a	cost of the state's		
☐ No.			
<b>1.6.2</b> Will the Lead Agency use <u>private donated funds</u> to meet a part of requirement of the CCDF pursuant to §98.53(e)(2)?	the matching		
Yes. If yes, are those funds: (check one below)			
☐ Donated directly to the State?			
Donated to a separate entity or entities designated private donated funds?	ated to receive		
a) How many entities are designated to receive private do	onated fund?		
b) <b>Provide</b> information below for <u>each entity</u> :  Name:			
Address:			
Contact:			
Type:			
No.			
<b>1.6.3</b> During this plan period, will State expenditures for Pre-K program any of the CCDF maintenance of effort (MOE) requirement?	is be used to meet		
Yes ( <b>respond to 1.6.5</b> ), and:			

	a) The State assures that its level of effort in full day/full year child care services has not been reduced, pursuant to §98.53(h)(1).
	b) (20 %) Estimated percentage of the MOE requirement that will be met with Pre-K expenditures (not to exceed 20 %.)
	c) If the Lead Agency uses Pre-K expenditures to meet more than 10 % of the MOE requirement, <b>describe</b> how the Lead Agency will coordinate its Pre-K and child care services to expand the availability of child care (§98.53(h)(4)):
	The State's Pre-K program, managed by the Department of Education (DOE) in collaboration with the Lead Agency, receives state funding which is used to meet a portion of the CCDF Maintenance of Effort(MOE). As of July 1, 2005 the State Pre-K Program was expanded statewide with funding being awarded on a competitive basis to local education agencies and qualifying child care agencies. The program, in partnership with the child care industry, will continue to create expanded availability of enhanced educational opportunities for 4 year-old children. This includes wrap-around child care services to increase the availability of full-day, full-year child care designed to meet the needs of working families. Portions of the funds are used to coordinate the certification and reporting of Pre-K expenditures.
	No.
	ng this plan period, will State expenditures for Pre-K programs be used to meet CCDF Matching Fund requirements? (§98.53(h))
	Yes (respond to 1.6.5), and
	a) ( $\underline{20}$ %) Estimated percentage of the Matching Fund requirement that will be met with pre-K expenditures (not to exceed 30 %.)
	b) If the State uses Pre-K expenditures to meet more than 10% of the Matching Fund requirement, <b>describe</b> how the State will coordinate its Pre-K and child care services to expand the availability of child care (§98.53(h)(4)):
	No.
	e Lead Agency indicated "yes" to 1.6.3 or 1.6.4, <b>describe</b> Lead Agency efforts that pre-K programs meet the needs of working parents: (§98.53(h)(2))
co. a p Pr	e State's Pre-K program, managed by the Department of Education (DOE) in llaboration with the Lead Agency, receives state funding which is used to meet portion of the CCDF Maintenance of Effort (MOE). As of July 1, 2005 the State e-K Program was expanded statewide with funding being awarded on a mpetitive basis to local education agencies and qualifying child care agencies.

The program, in partnership with the child care industry, will continue to create expanded availability of enhanced educational opportunities for 4 year-old children, which includes wrap-around child care services, to increase the availability of full-day, full year child care designed to meet the needs of working families. Portions of the funds are used to coordinate the certification and reporting of Pre-K expenditures.

		bursuant to §98.53(e)(1)?
		Yes, <b>describe</b> the activity and source of funds:
		No.
<u>1.7</u>	Improper Pa	<u>ayments</u>
	-	te implemented any strategies to prevent, measure, identify, reduce and per payments? (§98.60(i), §98.65, §98.67)
		Yes, and these strategies are: As stated in 1.5.3(a), the State uses monitoring tools and audits to identify improper payments, and then collects these amounts, either through repayments or reductions made to payments being made for subsequent periods.
		In addition, the State's computer system provides controls for incoming billings to reduce improper payments before they are made, including duplicate billings and ineligible child billings.
		In addition to the response in § 1.5.3, the State's Improper Payment monitoring tool was approved and, as a result of the error review process, the results from the monitoring will be incorporated into staff training and if necessary remediation.
		No. If no, are there plans underway to determine and implement such strategies?
		Yes, and these planned strategies are:
		□ No.

# PART 2 DEVELOPING THE CHILD CARE PROGRAM

#### **2.1** Consultation and Coordination

**2.1.1** Lead Agencies are required to *consult* with appropriate agencies and *coordinate* with other Federal, State, local, tribal (if applicable) and private agencies providing child care and early childhood development services (§98.12, §98.14(a),(b), §98.16(d)).

**Indicate** the entities with which the Lead Agency has a) **consulted** and b) **coordinated** (as defined below), by checking the appropriate box(es) in Table 2.1.1.

Consultation involves the meeting with or otherwise obtaining input from an appropriate agency in the <u>development of the State Plan</u>. <u>At a minimum, Lead Agencies must consult with representatives of general purpose local governments (noted by the asterisk in the chart below).</u>

Coordination involves the coordination of child care and early childhood development services, including efforts to coordinate across multiple entities, both public and private (for instance, in connection with a State Early Childhood Comprehensive System (SECCS) grant or infant-toddler initiative). At a minimum, Lead Agencies must coordinate with (1) other Federal, State, local, Tribal (if applicable), and/or private agencies responsible for providing child care and early childhood development services, (2) public health (including the agency responsible for immunizations and programs that promote children's emotional and mental health), (3) employment services / workforce development, (4) public education, and (5) Temporary Assistance for Needy Families (TANF), and (6) any Indian Tribes in the State receiving CCDF funds (noted by the asterisks in the chart below).

**Table 2.1.1 Consultation and Coordination** 

Agency	a) Consultation in Development of the Plan	b) Coordination with Service Delivery
Representatives of local government	⊠ *	$\boxtimes$
Other Federal, State, local, Tribal (if applicable), and/or private agencies providing child care and early childhood development services.		*
Public health		*
Employment services / workforce development		*
Public education		*
TANF	$\boxtimes$	*

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	a) Consultation in Development of the	b) Coordination with Service
Agency	Plan	Delivery
Indian Tribes/Tribal Organizations, when		
such entities exist within the boundaries of		*
the State		
State/Tribal agency (agencies) responsible		
for:		
State pre-kindergarten programs		$\boxtimes$
Head Start programs		$\boxtimes$
Programs that promote inclusion for children with special needs		
Other (See guidance):		

For each box checked in Table 2.1.1, (a) identify the agency(ies) providing the service and (b) describe the consultation and coordination efforts. Descriptions must be provided for any consultation or coordination required by statute or regulation.

Diane Neighbors	Metropolitan Davidson County Vice Mayor	County Government
Traci Sampson	Community Institute for Early Childhood In partnership with Memphis Tomorrow and Mayor A.C. Wharton	City Government
Jan Bushing	Tennessee Department of Education Office of Early Childhood Education	State Government Pre-K
Bobbi Lussier	Tennessee Department of Education	State Government
Janet Coscarelli	Tennessee Department of Education Head Start State Collaboration Office	State Government Federal Program
Linda O'Neal	Tennessee Commission on Children and Youth	State Government Advocacy Organization
Rosie Wooten	Department of Health Maternal and Child Health, Early Childhood Comprehensive Systems	State Government
Mary Jane Dewey	Tennessee Department of Health Maternal & Child Health	State Government

<sup>\*</sup> Required.

Mary Rolando	Tennessee Governor's Office of Children's Care Coordination	State Government
Paul Lefkowitz	Tennessee Department of Human Services Director, Families First (TANF)	State Government Federal Program
Steve Neece	Tennessee Department of Human Services Director, Child & Adult Care Food Program	State Government Federal Program
Gail Crawford	Tennessee Department of Human Services Director, Infant/Toddler Services	State Government Infant/Toddler Programs
Gary Smith	Tennessee Department of Human Services Director, Child Care Planning & Developme	State Government
Teresa Dorian	Tennessee Department of Human Services Director, Child Care Assessment Program	State Government
Lois Barrett Luke	Tennessee Department of Human Services Director, Child and Adult Care Licensing	State Government
Patti Gibson	Tennessee Child Care Association President	Advocacy Organization
Kay Von Boeckman	Tennessee Child Care Association Board Member, Bartlett Child Care Center	Advocacy Organization, Child Care Owner
Rose Carver	Tennessee Association for the Education of Young Children – President	Advocacy Organization
Daphne Cole	Tennessee Family Child Care Alliance Executive Director	Advocacy Organization
Ginger Wood-Oguno	Tennessee Child Care Association, Educational Excellence Academy	Advocacy Organization, Child Care Owner
Joyce Bridges	Signal Centers, Inc. Tennessee CCR&R Network Director	Non-Profit Organization, Child Care Resource and Referral
Judy Smith	Signal Centers, Inc. Chief Officer of Statewide Initiatives	Non-Profit Organization, Child Care Resource and Referral
John Garnett	Department of Human Services Small Business Services	Economic Development

Judy Graham	Sequatchie Valley Head Start, Tennessee Head Start Association	Head Start Head Start Association
Carla Snodgrass	Prevent Child Abuse Tennessee	Non-Profit Organization, Advocacy Organization
Linda McReynolds	United Way of Greater Chattanooga	United Way
Sue Bailey	Tennessee Technological University	Higher Education
Katari Coleman	Tennessee Early Childhood Training Alliance	Higher Education

The Lead Agency solicited input from representatives of the agencies listed regarding joint initiatives and collaborations. A meeting of these representatives was held and a draft of the State Plan was presented. The group made suggestions that were included in the Plan. See Section 2.1.3. for a description of continuing efforts to coordinate across the State's child care and early childhood development service delivery network.

2.1.2 Emergency Preparedness and Response Plan for Child Care and Early **Childhood Programs**. Lead Agencies are encouraged to develop an emergency preparedness and response plan for child care and other early childhood programs operating in the State/Territory. The plan should include provisions for continuity of services and child care assistance payments to families and providers in the event of an emergency or disaster. Indicate which of the following best describes the current status of you efforts in this area. Check only ONE.

	<b>Planning</b> . Indicate whether steps are under way to develop a plan. If so,
	describe the time frames for completion and/or implementation, the steps anticipated and how the plan will be coordinated with other emergency
	planning efforts within the State/Territory.
	<b>Developing.</b> A plan is being drafted. Include the plan as Attachment 2.1.2
	if available.
	<b>Developed.</b> A plan has been written but has not yet been implemented.
	Include the plan as Attachment 2.1.2, if available.
$\boxtimes$	<b>Implementing.</b> A plan has been written and is now in the process of
	being implemented. The plan is included as Attachment 2.1.2.
	Other. Describe:
	Other. Describe:

- a) **Describe** the progress made by the State/Territory in planning for an emergency or disaster event with regards to the operation of child care and early childhood education programs.
- b) Describe provisions the Lead Agency has in place for the continuation of core child care functions during and after a disaster or emergency.

- c) **Describe** efforts the Lead Agency has undertaken to provide resources and information to families and child care providers about ways to plan and prepare for an emergency or disaster situation.
- **d) Describe** how the Lead Agency is coordinating with other State/Territory agencies, private, and/or non-profit charitable organizations to ensure that child care and early childhood programs are included in planning, response, and recovery efforts.
- **2.1.3 Plan for Early Childhood Program Coordination**. Lead Agencies are encouraged to develop a plan for coordination across early childhood programs. **Indicate** which of the following best describes the current status of your efforts in this area. **Note: Check only ONE.**

	<b>Planning</b> . Are there steps under way to develop a plan?
	Yes, and <b>describe</b> the time frames for completion and/or implementation, the steps anticipated, and how the plan is expected to support early language, literacy, pre-reading and early math concepts.
	□ No.
	<b>Developing</b> . A plan is being drafted. Include the draft as <b>Attachment</b>
	<b>2.1.3</b> if available.
	<b>Developed</b> . A plan has been written but has not yet been implemented.
	Include the plan as <b>Attachment 2.1.3</b> if available.
	<b>Implementing</b> . A plan has been written and is now in the process of
	being implemented. Include the plan as <b>Attachment 2.1.3</b> .
$\boxtimes$	Other (describe):
a)	<b>Describe</b> the progress made by the State/Territory in planning for coordination across early childhood programs since the date of submission of

(see below):

the 2008-2009 State Plan.

Program coordination across early childhood programs has resulted in the completion, printing, and distribution of the Tennessee Early Learning Developmental Standards (TN-ELDS) for ages 0 to 60 months (for more details see Sections 5.2.1 – 5.2.4). Effective July 1, 2009, early childhood program partners launched an interactive training website (with unlimited 24/7 access for child care providers. The production of this interactive website is one of the tools planned to help providers fully understand and implement the standards. The partners working on the standards, website, and other materials include: the Tennessee State Departments of Education and Human Services, the Child Care Resource and Referral Network, the Tennessee Early Childhood Training Alliance, the Tennessee Head Start Collaboration Office, representative faith-based child care providers,

Tennessee Child Care Provider Training representative, Infant/Toddler Specialist, Community Based (United Way) Child Care provider, and representative of Tennessee Early Intervention System. Each program has incorporated the TN-ELDS into its system of early childhood services and has committed to assist in the statewide training strategy to assure that all practitioners of early care and education are trained on the appropriate and continuous usage of the TN-ELDS.

The Tennessee School-Age Developmental Standards were developed to supply guidance for child care providers regarding the continuum of developmental milestones for children, from Kindergarten – Eighth grade. These standards were compiled specifically for use in child care, versus educational, environments. These standards are based upon current research and address Social-Emotional, Physical and Cognitive aspects of the development of schoolage children. These standards are intended to serve as a tool to inform choices and planning regarding activities, environment, program structure, staffing, materials and supplies in child care programs serving school-age children. The Department of Human Services established an advisory committee early in 2009 for the purpose of providing recommendations regarding the implementation of the newly promulgated edition of the Report Cards and Rated Licensing Rules. This committee is comprised of child care experts representing the broad spectrum of individuals and organizations who partner throughout the state to support high quality care for our children and included: Project TOPSTAR (family child care), Tennessee Department of Education, Child and Adult Care Licensing, Program Assessment, Tennessee Family Child Care Alliance, Tennessee Child Care Association, Tennessee School-Age Care Alliance, Child Care Resource and Referral, Tennessee Child Care Provider Training, Tennessee State University Center of Excellence for Learning Sciences, Tennessee Early Childhood Training Alliance, University of Tennessee Social Work Office of Research and Public Service, YMCA School-Age Services.

Another example of collaboration across early care and education programs began with Tennessee's Infant/Toddler Initiative supported by a grant from the National Infant & Toddler Child Care Initiative @ Zero to Three. As a result of this initiative several infant/toddler specialist positions and a supervisor were added to the Child Care Resource & Referral Network, and a director position in Department of Human Services' Child Care Planning & Development Unit was designated as Infant/Toddler Services Director. Various materials suggested and/or developed during the infant/toddler initiative have been printed to educate parents and providers regarding the needs of infants/toddlers including a DVD developed in partnership with United Way of Greater Chattanooga and Tennessee Family Child Care Alliance. This DVD is now being distributed to all parents enrolling in the child care certificate program. In addition, the CCR&R staffs are distributing the DVD to parents requesting referrals to locate quality child care programs. All CCDF funded child care quality and support programs, those early childhood programs funded or administered by the Department of Education and the Department of Health, as well as the state's Early Head Start programs are participating in this with the following goals:

• Improve scores on the Infant/Toddler Environment Rating Scale- Revised and the Family Day Care Rating Scale. Note: Tennessee will implement the Family Child Care Rating Scale – Revised in August, 2010.

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- Increase access to affordable quality care in Centers, Group and Family Child Care, Early Head Start, and Family, Friends and Neighbor programs
- Increase access to quality child care for TANF and low-income working families through community based agencies, including faith-based organizations.
- Increase child care provider, parent and community knowledge of infant/toddler development and care needs.

Under the leadership of the Department of Human Services' Infant/Toddler Services Director, Tennessee is developing an Infant/Toddler credential. The credential will include multiple pathways for child care providers to enter the process and work toward completion. The Child Care Resource and Referral (community-based training and targeted technical assistance) and the Tennessee Early Childhood Training Alliance (higher education, academic credits, Child Development Associate Credential supports) are working collaboratively with the Department to finalize the credential structure and funding needs. Based on available funding, the Infant/Toddler Credential could be implemented in 2010-2011.

Numerous early childhood organizations are collaborating on a local basis to pool funding for public awareness of and support for quality early childhood programs. One example of this type of effort is in Memphis, Tennessee where a collaborative of 45 community organizations in partnership with government (local and state), business, foundations, health care, and social services groups have come together to promote a community priority for the quality early care and development of children.

Another joint effort is in Chattanooga and involves family and group home child care providers. Project Ready for School collaborated with Signal Centers and the Tennessee Child Care Resource and Referral (CCR&R) Network to provide nationally recognized research based curriculum-based training development, delivery of a series of training opportunities targeted to the family child care provider, and the technical assistance to support quality improvements for family child care providers in Hamilton County. The Tennessee Family Child Care Alliance also consulted with the project. The evaluation of this project shows improvement and maintenance of quality by the family providers.

An additional collaborative effort involves the introduction and implementation of the Strengthening Families model in Tennessee. Partners from across the state are working together to create a child abuse and neglect prevention framework that shifts the focus of prevention efforts from family risk and deficits to family strengths and resiliency. An interdisciplinary leadership team to guide Strengthening Families implementation and work was established and meets quarterly. Eleven Parenting Liaisons positions were added to the CCR&R Network along with a supervisor position to work toward establishing Strengthening Families in provider model sites. Training on Strengthening Families Protective Factors was created and is being offered in workshops to all providers and other interested parents and partners on a quarterly basis. The Parenting Liaisons are also working with teen parents and parents using the Certificate Program on how to find and use quality child care. The Parenting Liaisons are working to establish provider and parent support groups called Community Cafes. In partnership with agencies such as Prevent Child Abuse Tennessee, the

Parenting Liaisons are seeking to establish a cadre of parent leaders trained in conducting Community Cafes in order to promote the Strengthening Families approach. Partners continue to work together to integrate the Strengthening Families model into the early care and education community.

The Departments of Health, Division of Maternal and Child Health held a series of meetings to plan implementation of Tennessee's State Early Childhood Comprehensive Systems (SECCS). The Departments of Human Services, Children's Services, Mental Health, Developmental Disabilities, the Council on Developmental Disabilities, Tennessee Commission on Children and Youth, Head Start Collaboration Office and community leaders from United Way, children's medical facilities and others participated. The TN Department of Health-Maternal and Child Health Section serves as the organizing office for the state's Early Childhood Comprehensive Systems (ECCS) Program. The work of ECCS is accomplished through the continuous effort of the advisory committee, made up of representatives for each of the identified organizations concerned about early childhood well-being. To date, there are 130 participants listed in the ECCS directory with 60 active members. These individuals attend quarterly meetings and participate in monthly conference calls for various subcommittees organized to accomplish ECCS objectives. To complete the Title V mandate, ECCS completed an assessment of needs and the group set goals and formed work groups.

The work groups included Family Support/Parent Education, Access to Insurance/Medical Home, Mental Health/Social-Emotional Development, and Early Care, Education and Child Care. The implementation plan was submitted and approved in January 2008. ECCS is working to finalize a contract with East Tennessee State University, Department of Public Health planning group to monitor and evaluate the implementation of the plan and move forward to work together to develop a more comprehensive early childhood system. The contract with ETSU will be effective July 1, 2009.

Professional business management and development training and personal counseling for new and existing child care facilities, and business planning orientation training for potential child care facility owners is offered by Child Care Business Services of the Lead Agency and a collaboration with the Tennessee Small Business Development Lead Center (TSBDC) at Middle Tennessee State University. The TSBDC network has over 37 counselors located throughout the state at 13 sites. Each counselor is a certified business consultant and all locations are accredited through the Association of Small Business Development Centers. Additionally, TSBDC provides a comprehensive array of services including training and counseling on all aspects of meeting the needs of a potential or existing business owner. When a more complicated business need arises, TSBDC has access to a university faculty member for expert advice.

**b) Indicate** whether there is an entity that is, or will be, responsible for ensuring that such coordination occurs. Indicate the four or more early childhood programs and/or funding streams that are coordinated and describe the nature of the coordination.

The Lead Agency works in conjunction with the Departments of Education, Health, Mental Health and Developmental Disabilities, the Tennessee Child Care Resource and Referral Network, the Tennessee Early Childhood Training Alliance and members of other early childhood industry and advocacy groups in an ongoing effort to further the collaboration effort. The Lead Agency sponsors a State Child Care Partner's Meeting with the partners listed above. The purpose of these meeting is to discuss the latest program evaluation data from various early childhood initiatives, to determine the effectiveness of the initiatives, to develop strategies (to include the pooling of funding and resources) and to discuss ways to strengthen the areas that need improvement. All of these partners also work with the SECCS initiative. In addition, the Lead Agency is an active partner on TEAM TENNESSEE, which is the conduit for planning & managing a technical assistance grant from the Center on Social and Emotional Foundations for Early Learning (CSEFEL) to expand access to high quality & effective training in social emotional skills in young children.

> c) **Describe** the results or expected results of this coordination. Discuss how these results relate to the development and implementation of the State/Territory's early learning guidelines, plans for professional development, and outcomes for children.

Coordination across state, private, and non-profit organizations has resulted in the enhancement of resources to promote quality child care programs in the state. Tennessee's Evaluation and Report Card Program has shown a statistically significant increase between year one and year seven in the number of child care programs showing an improvement of their overall rating. For 2001-2008, the Evaluation and Report Card Program measured the areas of licensing compliance, staff development, family involvement, ratio and group size, staff compensation, business management and assessment of a healthy, safe environment for children to promote learning and school readiness. After numerous public hearings and input from providers, the Report Card was revised. As a result of an overall improvement of Report Card scores for child care centers, family child care homes, and group homes, the component areas were modified effective January, 2009. Compliance with licensing regulations became the threshold by which child care agencies would enter into the quality rating system. The licensing compliance component has been replaced with Developmental Learning, which allows the Lead Agency to build on the established early learning guidelines, add a focus on school-age developmental learning, and focus at the providerlevel with implementation of the developmental learning standards.

Coordination between state departments and agencies providing services to promote child care quality has resulted in work to provide outreach to parents to support learning and development of children in their homes. The Governor's Books from Birth Foundation coordination with Dolly Parton's Imagination Library is a community initiative linking local governments and state-wide programs, such as the Tennessee Child Care Resource and Referral Network (CCR&R), to bring literacy to every child in Tennessee. Parents of every child born in Tennessee's 95 counties can enroll in this program and the child receives one book a month from birth to age five. Kid Fitness is another example of a partnership between the United Way of Greater Chattanooga and the Lead Agency. Through a Diabetes Prevention grant from the TN Department of Health, United Way of Greater Chattanooga

provided child care providers with a developmentally appropriate activities kit to encourage physical activity and healthy nutrition. The CCR&R was a partner providing training and technical assistance to the providers in using these kits.

The Department of Human Services in coordination with Licensing and Assessment produce an annual report card that is to be posted in the child care provider's facility. The Licensing unit within DHS is responsible for assuring all licensing regulations and laws are adhered to by licensed child care providers. These provisions are addressed on the report card in all but one of the component areas of the report card. The DHS Assessment unit is responsible for the completion of an annual assessment of the child care environment for all licensed facilities. DHS trained and reliable assessors assess all license child care provider environments using the valid and reliable Environment Rating Scales©. Information from the classroom environment observation is compiled in an assessment summary that is submitted to Licensing for inclusion on the report card. In addition, this same report is given to the provider and to the CCRR agency working with providers. The assessment report serves as a platform for all partners in the state to continuously work to improve the quality of early childhood programs. Information on various indicators of quality is analyzed on a regular basis by management and by partners and used as a means to determine provider needs related to training, quality programming, and other initiatives.

The CCR&R Network provides training and other services in early childhood care and development for child care providers and the early childhood staff partners from the Departments of Health, Education, and Mental Health and Developmental Disabilities. CCR&R child care provider training maximizes CCDF funding by directly including early childhood staff from other state departments, Early Head Start, Head Start and Even Start. CCR&R is encouraging child care providers and other early childhood practitioners to link the training they receive with on-site technical assistance and on-site targeted technical assistance to help make the connection between theory and practical application.

Tennessee's Outstanding Providers Supported Through Available Resources (TOPSTAR a family child care mentoring program) and the Tennessee Early Childhood Training Alliance (TECTA) are working with the CCR&R Network to promote staff development for child care providers. One objective of this collaboration is to establish support groups and mentoring for family providers.

The Tennessee Early Childhood Training Alliance (TECTA) provides a 30 clock-hour orientation in several early childhood disciplines and provides subsidized academic courses at local colleges and universities for providers working toward their Child Development Associate (CDA) Credential. This allows child care providers to improve their knowledge of child development and best practice while earning a CDA, the Early Childhood Technical Certificate, two and four-year degrees and other advanced degrees. The CCR&R Network also offers information regarding TECTA professional development opportunities and encourages providers to take advantage of the opportunity to further their education.

Tennessee's Early Learning Developmental Standards (TN-ELDS) are completed and printed (the funding for which came from the pooling efforts of the State Child Care Partners group). The CCR&R Network has trained its entire training and technical assistance staff, who in turn are providing classes on the appropriate use the TN-ELDS to child care providers and others in the early childhood field. TECTA and the CCR&R Network are also weaving the TN-ELDS into all of their child care provider training and education modules. The objective is to promote the understanding of child development, learning expectations and performance indicators so that caregivers will understand how children learn and how to tailor child care to meet the specific needs of children. The Department of Education has also trained staff working in Head Start, Even Start and DOE classrooms. The Department of Health is collaborating with DHS and DOE to support the understanding and use of the TN-ELDS.

Head Start Performance Standards & Environment Rating Scales © served as resources to Tennessee Early Childhood professionals in developing the TN-ELDs, which are aligned with the Tennessee K-12 curriculum standards. Head Start outcomes & Pre-K curricula correlate with TN-ELDs. All Pre-K curricula must be correlated with the TN-ELDs.

As a result of state-level partner collaboration, a new program was implemented in July, 2008. The primary focus of PSAM - the Provider Self-Assessment and Mentoring service - structure and supports is to give the director/owner more feedback and guidance on the HOWs and WHYs the program assessment was scored. Tennessee uses the Environment Rating Scales© for the program assessment mandated for all licensed child care agencies. Overall, PSAM will help providers better understand the assessment process and scoring AND show them the path to improving quality by applying the new knowledge to programming and daily practice. The primary directions within PSAM are as a direct result of the two studies conducted by the University of Tennessee - SWORPS and the Comptroller's Office, particularly around child care provider responses.

**d) Describe** how the State/Territory's plan supports, or will support, continued coordination among the programs. Are changes anticipated in the plan?

As stated above, the Lead Agency has formed a working partnership (in the form of the State Child Care Partners group) with other state departments and both private and non-profit organizations to promote collaboration with the objective of assuring the best possible outcomes for children. This collaboration concentrates on providing a healthy, safe, learning environment so that children can achieve developmental milestones and be ready for school. Tennessee has formed a comprehensive system of support and staff development for providers through this collaboration. The collaboration is also seeking to partner with the community to encourage involvement in early childhood development and education through local and state contacts.

A Memorandum of Understanding (MOU) exists between the Department of Education and the Lead Agency outlining expectations for continued coordination of early childhood education. A Memorandum of Understanding (MOU) also exists between the Department of Children's Services and the Lead Agency outlining expectations for required communication

between departments and coordination of investigations into allegations of child abuse and neglect. The Lead Agency also has an inter-agency contract with the Department of Health outlining funding and collaboration for child care health consultants and other health education and/or services for early childhood education. The Department of Mental Health and Developmental Disabilities collaborates with the Child Care Resource & Referral Network under the Lead Agency's direction to provide training and education services for providers serving children with disabilities. Tennessee does not anticipate any changes in its system of coordination and collaboration.

### **2.2 Public Hearing Process**

**Describe** the Statewide/Territory-wide public hearing process held to provide the public an opportunity to comment on the provision of child care services under this Plan. (658D(b)(1)(C), §98.14(c)) At a minimum, the description must provide:

- a) Date(s) of notice of public hearing: May 15, 2009 and June 9, 2009
- b) Manner of notifying the public about the public hearing:

The public was notified via Public News Release to 200 major media outlets statewide, direct mailing and/or e-mailing of notice of the plan to specifically identified persons in state and local government, and a copy of the notice was added to the state's website for all interested persons.

- c) Date(s) of public hearing(s): *June 8, 11, 12, and 29, 2009*
- d) Hearing site(s):

<u>June 8, 2009</u>
<u>Citizens Plaza State Office Building, 2<sup>nd</sup> floor Board Room</u>
<u>400 Deaderick Street</u>
<u>Nashville, TN 37243</u>

June 11, 2009 <u>Conference Room A, 7<sup>th</sup> Floor</u> 531 Henley Street <u>Knoxville, TN 37902</u>

June 12, 2009 AND June 29, 2009

2<sup>nd</sup> Floor Auditorium

Donnely J. Hill State Office Building

170 North Main Street

Memphis, TN 38103

e) How the content of the plan was made available to the public in advance of the public hearing(s):

The content of the plan was made available on the state's website at www.state.tn.us/humanserv/. The plan was also duplicated and distributed to interested parties upon request by mail or e-mail; both electronic and paper copies were made available to each of the individuals on the coordination/collaboration list. In addition, three individuals requested an electronic copy for review. Review copies (paper version) were made available at each of the public hearings.

f) Attach a brief summary of the public comment process as Attachment 2.2.

Individuals from the public were given the opportunity to make comments at each of the hearings; comments were received at two of the four public hearings. Comments could also be submitted by e-mail and phone; comments from two individuals were received via this process. Comments were documented and reviewed for the final edit of the CCDF Plan document.

#### 2.3 **Public-Private Partnerships**

Does the Lead Agency conduct or plan to conduct activities to encourage public-private partnerships that promote private-sector involvement in meeting child care needs?

 $\boxtimes$ Yes. If yes, **describe** these activities or planned activities, including the results or expected results.

The Department of Human Services, through the child care services small business initiative, provides the following:

- Educating the community, especially employers, about the bottom-line benefits associated with public and private child are assistance;
- Facilitating collaborative initiatives that enable employers to share ideas as well as pool resources to address child care needs;
- Providing one-on-one counseling, technical assistance and referral services to the corporate community;
- Disseminating child care related small business information to new and expanding companies, the Chamber of commerce, mayors, county n

executives, and other governmental and non-governmental entities upor request.
No.

# PART 3 CHILD CARE SERVICES OFFERED

### 3.1 Description of Child Care Services

- **3.1.1** Certificate Payment System. <u>Describe</u> the overall child care certificate process, including, <u>at a minimum</u>:
  - a) a description of the form(s) of the certificate (§98.16(k)):

The child certificate is a one page, system generated form listing the eligible parent's name, address, chosen provider, eligibility type, eligibility period, child(ren) needing care, their payment schedule type and any assigned parent copay fee. The parent receives one copy for his/her records and another copy to present to his/her chosen provider. The certificate authorizes child care services. The provider is paid directly by the Lead Agency based on documentation of attendance through an invoice submitted by the provider on a monthly, semimonthly, or bi-weekly basis, showing hours and days of each child's attendance.

b) a description of how the certificate permits parents to choose from a variety of child care settings by explaining how a parent moves from receipt of the certificate to choice of the provider; (658E(c)(2)(A)(iii), 658P(2), §98.2, §98.30(c)(4) & (e)(1) & (2))

All Tennessee parents, including TANF and non-TANF, are interviewed in person upon the initial intake and eligibility process. During this interview, the family's child care needs are determined and the parent is oriented on the full range of provider types, elements of quality child care and what to look when searching for quality child care services. Lists of providers enrolled in the certificate program are made available to each parent. All parents are advised they may select from and receive subsidy assistance for the full range of providers, including formal, informal, unregulated or limited in-home care. If needed, an authorization form can be generated for a parent to present during their search to verify their eligibility. Additionally, all providers in the state are listed on the Lead Agency's Internet website at: www.state.tn.us/humanserv/. The website search provides parents with in-depth information about the provider such as: if they accept certificates, if they provide transportation services, what type of provider they are, the results of the provider's Report Card, and provider participation in the Star Quality Program. This website allows parents access to information at their convenience at home, work or public Internet locations. Once the parent has made their choice of a provider and presents this information to the Lead Agency, the child is enrolled and a certificate is issued to the parent. TANF and transitional parents may receive retroactive assistance when pre-existing periods of eligibility have been determined.

c) if the Lead Agency is also providing child care services through grants and contracts, estimate the proportion of §98.50 services available through certificates versus grants/contracts (this may be expressed in terms of dollars, number of slots, or percentages of services), and explain how the Lead Agency ensures that parents offered child care services are given the option of receiving a child care certificate. (§98.30(a) & (b)).
Tennessee does not provide certificate child care services through grants or contracts.
d) Attach a copy of your eligibility worker's manual, policy handbook, administrative rules or other printed guidelines for administering the child care subsidy program as Attachment 3.1.1.
Note: If these materials are available on the web, the Lead Agency may provide the appropriate Web site address in lieu of attaching hard copies to the Plan.

The current manual is available at:

http://www.tennessee.gov/humanserv/adfam/cccp-manual.pdf

	on to offering certificates, does the Lead Agency also have grants or hild care slots?
	Yes, and <b>describe</b> the type(s) of child care services available through the grant or contract, the process for accessing grants or contracts, and the range of providers that will be available through grants or contracts: (658A(b)(1), 658P(4), §§98.16(g)(1), 98.30(a)(1) & (b))
$\boxtimes$	No.
	d care services provided through certificates, grants and/or contracts offered e State/Territory? (658E(a), §98.16(g)(3))
$\boxtimes$	Yes.
	No, and <b>identify</b> the localities (political subdivisions) and services that are not offered:
	d Agency must allow for in-home care (i.e., care provided in the child's at may limit its use. Does the Lead Agency limit the use of in-home care in
	Yes, and the limits and the reasons for those limits are ( $\$\$98.16(g)(2)$ , $98.30(e)(1)(iv)$ ):

*In Tennessee, and individual may legally provide care for up to four (4)*unrelated children, along with any number of related children, without being licensed by the Lead Agency. An individual may apply to enroll in the Agency's certificate program and receive certificate subsidy payments for eligible children, but must agree to certain limitations in order to participate in the program. Notably,

- 1) An enrolled unregulated provider must limit the number of unpaid related children under the age of 13 years to two children.
- 2) An enrolled unregulated provider must limit the number of paid children to four for a total of six related and unrelated children in care.
- 3) An applicant for unregulated care must conform to the basic health and safety checklist.
- 4) An applicant for unregulated care must be age 21 or older.

As of January 1, 2005, the Lead Agency stopped child care payments to unrelated providers caring for children in the child's own home with the following exception: Providers who live at the same address as the children they care for may be eligible to receive payment as an unregulated provider if it is their home in which the child is living.

There are specific criminal backgrounds that make an unregulated provider or applicant ineligible for enrollment or continued enrollment in the Certificate Program. These specific criminal backgrounds (used as a proxy for the possible criminal history of the individual) give sufficient concern for the health and safety for the children enrolled in the Certificate Program to warrant exclusion as a provider.

Although the Department does not routinely perform a background check on unregulated providers, provider applicants must be asked about their criminal history.

Persons are not enrolled as an unregulated provider if it is self-disclosed, reported to, or otherwise brought to the attention of the Department that the unregulated provider, member of the provider's family residing in the home, or anyone having contact with the children in the provider's home is currently charged with, has been convicted of, or pled guilty to:

- any crime involving a child,
- any crime of violence against another person, or
- any drug-related crime (e.g., use, possession, transporting, selling, manufacturing).

Exceptions are made with State Office approval.

		Certain exemptions are permitted for in-home care and for care provided by immediate relatives. Please see item labeled Attachment Part 3.1.1.B, Unrelated Child Care Provider Health & Safety Checklist. A parent has the right to appeal the Department's decision to not pay for an unregulated provider, which has been selected by the parent, when that provider fails to meet the basic requirements.
		No.
3.2	Payment Rat	tes for the Provision of Child Care
		658E(c)(4) and the regulations at §98.43(b)(1) require the Lead Agency to ment rates for child care services that ensure eligible children equal access e care.
	3.2.1 Provide	e a copy of your payment rates as <b>Attachment</b> 3.2.1.
	The attached	payment rates were effective as of: July 1, 2008.
	<b>3.2.2</b> Are the State/Territor	attached payment rates provided in Attachment 3.2.1 used in <u>all</u> parts of the y?
	$\boxtimes$	Yes.
		No, and other payment rates and their effective date(s) are provided as <b>Attachment 3.2.3</b> .
	rates are suffi children whos	e a summary of the facts relied on by the State to determine that the attached cient to ensure equal access to comparable child care services provided to se parents are not eligible to receive child care assistance under the CCDF ernmental programs. Include, at a minimum:
	,	e month and year when the local market rate survey(s) was completed (3(b)(2)):
	July 2	008.
	of the should	opy of the <b>Market Rate Survey instrument</b> and a <u>summary of the results</u> survey are provided as <b>Attachment 3.2.3</b> . At a minimum, this summary d include a description of the sample population, data source, the type of dology used, response rate, description of analyses, and key findings.

Note on completion of the market rate survey: A graduate research assistant completed all of their work under the direction, mentoring, and supervision of researchers at the Center of Business and Economic Research which has conducted all previous studies.

	e Lead Agency use its <b>current</b> Market Rate Survey (a survey completed no 0/1/07) to set payment rates?
	Yes.
$\boxtimes$	No.

**3.2.5** At what percentile of the <u>current</u> Market Rate Survey is the State payment rate ceiling set?

The most recent rate increase, which was effective 1/1/08, insured that reimbursement rates were, at a minimum, at the 60<sup>th</sup> percentile for infant care, 50<sup>th</sup> percentile for toddler care, and 45<sup>th</sup> percentile for preschool care. Currently, compared to the most recent market rate study, those reimbursement rates fall below those thresholds.

**Note:** If you do not use your current Market Rate Survey to set your rate ceilings or your percentile(s) varies across categories of care (e.g., type of setting, region, or age of children), **describe** and provide the range of variation in relation to your current survey.

**3.2.6 Describe** the relationship between the attached payment rates and the market rates observed in the current survey, including at a minimum how payment rates are adequate to ensure equal access to the full range of providers based on the results of the above noted local market rate survey: (§98.43(b))

The Lead Agency performs an annual market rate analysis of statewide child care, with the latest being released in July 2008, for purposes of planning the state fiscal year 2009/2010. This market analysis was from data tabulated from the Lead Agency's child care information database of all regulated child care providers across the state with fewer than 50% subsidy children enrolled and represents all geographic regions within the state. The analysis allows the Lead Agency to compare its reimbursement rates with the child care market rates. Based on the results of the market rate analysis, and budget considerations, the Lead Agency sets its provider rates dependent upon area, provider types, and child ages. The "area" variable is determined by ranking counties by population (2004) and per capita income (average for 2002-2004). Counties that place in the top 15 in either category are paid a higher rate, and for this market rate survey, 21 counties met one of the two criteria. Provider reimbursement rates for providers in the "Top 21" counties range between the 31st and the 52nd percentile of the market, and the remaining 74 counties rates range between the 23ed and the 76th percentile. Beginning in SFY 06 (7/1/05), a separate reimbursement rate is in place for infants (0-11 months)

and toddlers (12-23 months). Previously, all children under 2 years of age were paid identical rates.

Due to fiscal restraints, the state is unable to increase reimbursement rates on an annual basis. The last increase in rates was effective January 1, 2008. Using the 2006 market rate survey as a guide, this increase brought the rates to at least the 60<sup>th</sup> percentile for infants, 50<sup>th</sup> for toddlers, and 45<sup>th</sup> for pre-schoolers. New market rate surveys have been completed since this time, but rate increases have not been possible.

completed since this tin	ne, but rate increases have not been possible.
<b>3.2.7</b> Does the Lead Aş rates ensure equal acce	gency consider any additional facts to determine that its payment ss? (§98.43(d))
Yes. If,	yes, <b>describe</b> .
No.	
3.2.8 Does the State ha	ve any type of tiered reimbursement or differential rates?
Yes. If	yes, <b>describe</b> :
⊠ No.	
	e Lead Agency ensures that payment rates do not exceed the neral public for the same service. (§98.43(a))
Management System (T	es for each provider are encoded in the Tennessee Child Care (CCMS) and compared to state reimbursement rates when calculated. Payment is made based on the lesser of these two

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Amended Effective: \_\_\_\_\_

amounts.

#### 3.3 **Eligibility Criteria for Child Care**

## 3.3.1 Age Eligibility

a) Does the Lead Agency allow CCDF-funded child care for children above age 13 but below age 19 who are physically and/or mentally incapable of self-care? (658E(c)(3)(B), 658P(3), §98.20(a)(1)(ii))  $\boxtimes$ Yes. If yes, **define** physical and mental incapacity in Appendix 2, and **provide** the upper age limit 18 No. b) Does the Lead Agency allow CCDF-funded child care for children above age 13 but below age 19 who are under court supervision? (658P(3), 658E(c)(3)(B), §98.20(a)(1)(ii))  $\boxtimes$ Yes, and the upper age is <u>18</u>. No.

### 3.3.2 Income Eligibility

Complete columns (a) and (b) in Table 3.3.2 below based upon initial entry into the CCDF program. Complete Columns (c) and (d) **ONLY IF** the Lead Agency is using income eligibility limits lower than 85% of the SMI.

**Table 3.3.2 Income Eligibility** 

			IF APPLICABLE		
(a)		(b)	Income Level if lower than 85 SMI		
Family Size	100% of State Median Income (SMI) (\$/month)	<b>Median Income</b>	(c) \$/month	(d) % of SMI [Divide (d) by (a), multiply by 100]	
1	2669	2268	1601	60	
2	3490	2966	2094	60	
3	4311	3664	2587	60	
4	5132	4362	3079	60	
5	5953	5060	3572	60	

Note: Table 3.3.2 should reflect maximum eligibility upon initial entry into the CCDF program.

a) Does the Lead Agency have "tiered eligibility" (i.e., a separate income limit for remaining eligible for the CCDF program)?
Yes. If yes, <b>provide</b> the requested information from Table 3.3.2 and <b>describe</b> .
<b>Note:</b> This information can be included in a separate table, or by placing a "/" between the entry and exit levels in the above table.
No.
b) If the Lead Agency does not use the SMI from the most current year, <b>indicate</b> the year used:
State Median Income (SMI) figures for FY 2009-10 are based on the Federal Register, Vol. 74, No. 48, page 10924 (March 13, 2009.)
c) These eligibility limits in column (c) became or will become effective on:
July 1, 2009
d) How does the Lead Agency define "income" for the purposes of eligibility? <b>Provide</b> the Lead Agencies definition of "income" for purposes of eligibility determination. (§§98.16(g)(5), 98.20(b))
<b>Income,</b> for eligibility purposes, is defined as the gross household income of those family members counted within the household. This includes counting the work income from any teenage family member who is residing in the home and who is not attending school or a training program.
e) Is any income deducted or excluded from total family income (e.g., work or medical expenses; child support paid to, or received from, other households; Supplemental Security Income (SSI) payments)?
Yes. If yes, <b>describe</b> what type of income is deducted or excluded from total family income.
Excluded income, for eligibility purposes, is that amount paid out by the applying parent in child support as an absentee parent to another family; part time or summer employment of child or teenage family members who are still attending school or a training program; food stamps; certain education funds such as PELL grants.
□ No.

f) **Describe** whose income is excluded for purposes of eligibility determination.

The income of all family members is included.

### 3.3.3 Work/Job Training or Educational Program Eligibility

a) How does the Lead Agency define "working" for the purposes of eligibility? **Describe** the specific activities that are considered "working" for purposes of eligibility determination, including minimum number of hours. (§§98.16(f)(6), 98.20(b))

For the child care categories with work requirements, thirty hours of paid work per week is required. Self-employment and/or education and training hours may be used to meet this requirement. Work that does not meet the federal minimum wage requirement is allowed (such as working on commission), but the "countable" hours per week will be determined by dividing the gross weekly income by the federal minimum wage. If the education and training hours do not meet the 30-hour requirement, the difference must be made up with work.

- b) Does the Lead Agency provide CCDF child care assistance to parents who are attending job training or an educational program?
  - Yes. If yes, how does the Lead Agency define "attending job training or educational program" for the purposes of eligibility? **Describe**, the specific activities that are considered "job training and/or educational program", including minimum number of hours. (§§98.16(f)(3), 98.20(b))

The following education and training hours can be counted:

- Class hours in any public school, Tennessee Board of Regents (TBR) school (including Internet courses), or accredited private institution.
- Non-paid work performed in college "work-study" programs.
- Internship hours.
- Laboratory hours.
- Tutoring hours received or provided by the participant.
- Supervised homework/study time and one hour of unsupervised homework/study time for each hour of class time. Supervised homework/study time must be verified and documented to be countable toward educational training hours. The total countable homework/study time may not exceed the hours required or advised by the educational program

	No.
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# 3.3.4 Eligibility Based Upon Receiving or Needing to Receive Protective Services a) Does the Lead Agency provide child care to children in protective services? $(\S\S98.16(f)(7), 98.20(a)(3)(ii)(A) \& (B))$ Yes. If yes, **provide** a definition of "protective services" in Appendix 2. Does the Lead Agency waive, on a case-by-case basis, the co-payment and income eligibility requirements for cases in which children receive, or need to receive, protective services? (658E(c)(3)(B), 658P(3)(C)(ii), §98.20(a)(3)(ii)(A)) Yes. No. $\boxtimes$ No. b) Does the Lead Agency provide CCDF-funded child care to children in foster care whose foster care parents are not working, or who are not in education/training activities? (§§98.20(a)(3)(ii), 98.16(f)(7)) Yes. (**NOTE**: This means that for CCDF purposes the Lead Agency considers these children to be in protective services.) $\boxtimes$ No. Instead, Tennessee uses Social Services Block Grant (SSBG) funding transferred to the Department of Human Services from the Department of Children's Services to provide child care services to this population. 3.3.5 Additional Conditions for Determining CCDF Eligibility Has the Lead Agency established any additional eligibility conditions for determining CCDF eligibility? (658E(c)(3)(B), §98.16(g)(5), §98.20(b)) Yes, and the additional eligibility conditions are: (Terms must be defined in Appendix 2)

#### 3.4 Priorities for Serving Children and Families

No.

**3.4.1** At a minimum, CCDF requires Lead Agencies to give priority for child care services to children with special needs, or in families with very low incomes. **Complete** Table 3.4.1 below regarding eligibility priority rules. For columns (a) through (c), **check** 

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 $\boxtimes$ 

only one box if reply is "Yes". Leave blank if "No". **Complete** column (e) only if you check column (d).

### 1) Section 3.4.1 revised to reflect appropriate eligibility conditions and priority rules.

**Table 3.4.1 Priorities for Serving Children** 

3.4.1 Priorities for Serving Children						
Eligibility Category	(a) Guarantee subsidy eligibility	(b) Give priority over other CCDF- eligible families	(c) Same priority as other CCDF- eligible families	(d) Is there a time limit on guarantee or priority?	(e) How long is time limit?	
Children with special needs			$\boxtimes$			
Children in families with very low incomes			$\boxtimes$			
Families receiving Temporary Assistance for Needy Families (TANF)						
Families transitioning from TANF					18 mos.	
Families at risk of becoming dependent on TANF						
Low-income working families						

<sup>\*</sup> Required

Section 3.4.2 revised to include new category for low income working families earning less than 85% of the State Median Income.

**3.4.2 Describe** how the Lead Agency prioritizes service for the following CCDF-eligible children: (a) children with special needs, (b) children in families with very low incomes, and (c) other. Terms must be defined in Appendix 2. (658E(c)(3)(B))

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Tennessee Code 71-3-154 section (h)(1) specifies that an individual eligible for TANF assistance and who is participating in the work requirements will receive up to eighteen (18) months of child care assistance.

Tennessee Code 71-3-154 section (a)(5) specifies that an individual transitioning off of TANF assistance for any reason except for failure to cooperate with child support enforcement efforts and who is employed will receive eighteen (18) months of child care assistance.

Therein, the Lead Agency provides for the following priorities:

- Parents and caretakers receiving TANF cash assistance and in need of child care to meet their TANF work participation requirements
- Parents and caretaker's transitioning off of TANF cash assistance and in need of
- child care to meet full-time work participation requirements and earning less than 60% of the state median income.
- When funding permits Caretakers of TANF child-only cases in need of child care in order to work/attend school full time and earning less then 60% of the state median income.
- When funding permits Non-TANF parents earning less than 60% of the state median income and who meet full-time work participation requirements.
- When funding permits Non-TANF teen parents whose family earns less than 60% of the state median income and who meet full-time participation requirements.
- When funding permits Non-TANF families which have a child with special needs and the family earns less than 60% of the state median income.
- When funding permits Low-income working families earning less than 85% of the State Median Income.
- **3.4.3 Describe** how CCDF funds will be used to meet the needs of: (a) families receiving Temporary Assistance for Needy Families (TANF), (b) those attempting to transition off TANF through work activities, and (c) those at risk of becoming dependent on TANF. (658E(c)(2)(H), Section 418(b)(2) of the Social Security Act, §§98.50(e), 98.16(g)(4))
  - (a) families receiving Temporary Assistance for Needy Families

The Lead Agency maintains a state subsidy for all TANF participants meeting participation requirements (Families First Child Care). Effective January 1, 2005, the Lead Agency introduced a new category of assistance, At-Risk Child-Only (ARCO). As funding permits, this program makes child care assistance available for 1 year to caretakers in TANF child cases who meet work/education qualifications.

(b) those attempting to transition off TANF through work activities

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The Lead Agency provides Transitional Child Care (TCC) for those families leaving TANF, TCC is available for 18 months following the termination of their cash assistance. There is no lifetime limit for the TCC assistance and a new eligibility period of 18 months is granted upon each instance of TANF closure.

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(c) those at risk of becoming dependent on TANF When funding permits, an additional 12 months of child are assistance is provided following the expiration of the 18 month TCC period (At-Risk Child Care). (d) teen parents who are at risk of dropping out of high school or an equivalent thereof When funding permits the Lead Agency provides child care for Teen Parents Atrisk Child Care (TPACC). Teens may be living in the home of their parent(s) or emancipate. This care is reviewed every six months. The care ends when the teen graduates, drops out of school, or turns age 20; whichever occurs first. **3.4.4** Has the Lead Agency established additional priority rules that are not reflected in the table completed for Section 3.4.1? (658E(c)(3)(B), §98.16(g)(5), §98.20(b)) Yes, and the additional priority rules are: (**Terms must be listed and** defined in Appendix 2)  $\boxtimes$ No. Not applicable. CCDF funds are not used to provide child care in which children receive, or need to receive, protective services. Note: Tennessee uses Social Services Block Grant funding for this population. The Lead Agency does not administer the foster care program; that administrative agency is the Department of Children's Services. **3.4.5** Does the Lead Agency serve all eligible families that apply? Yes.  $\boxtimes$ No. **3.4.6** Does the Lead Agency have a waiting list of eligible families that they are unable to serve? Yes. If yes, **describe**. At a minimum, the description should indicate: a) Whether the waiting list is maintained for all eligible families or for certain populations? b) Whether the waiting list is maintained for the entire State/Territory or for individual localities?

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c) What methods are employed to keep the list current?

No.

3.4.6 In section 3.4.5, the State determines that it does not serve all eligible families. How is the State able to not maintain a waiting list if it does not serve all eligible families? Please provide further explanation.

Note of clarification: Tennessee is able to serve all families in categories that are required by state law – specifically active TANF participants and former TANF participants for 18 months following the closure of their cash assistance. The low-income working parent program has not been funded adequately to add any new families since 2001; therefore, we do not consider this as an open category for child care in Tennessee. The only families still receiving assistance in this category were "grandfathered" in at the point new approvals were halted. Because there is no expectation that this category will be re-opened, no waiting list is currently being compiled.

# 3.5 Sliding Fee Scale for Child Care Services

- **3.5.1** The statute and regulations require Lead Agencies to establish a sliding fee scale that varies based on <u>income and the size of the family</u> to be used in determining each family's contribution (co-payment) to the cost of child care (§98.42).
  - a) Attach the sliding fee scale as <u>Attachment 3.5.1., Parent Income Eligibility</u> and Co-pay Fee Table FY 2009/2010
  - b) **Describe** how the sliding fee scale is administered, including how the family's contribution is determined and how the co-payment is assessed and collected:

Assignment of co-pay fees is based on the non-TANF family's gross monthly household income. Fees are based on a percentage of gross monthly income against a percentage of the state median income ranging 'up the ladder' in 21 tiers to ensure the tiers graduate in very small steps. The minimum tier in all family sizes start at 10 % of the state median income with each tier increasing by 2.5 % to the maximum at 60 % of the state median income. Fees are based on the mid-point of each 2.5 % range in income to minimize the effect of the lower end of each tier paying a significantly higher proportion than the higher end of each tier. The mid-points start at 2% in the first tier and range up to 8.8% in the 21st tier. In effect, the minimum tier for a family of two pays as little as 1.0% of its monthly income in fees for one child while the low end of the 21st tier (paying the highest proportion) pays a maximum of 9% of their monthly incomes in fees for one child. The formula by which the parent co-pay amounts are calculated ensures that no parent pays in excess of 9% of their gross income toward the cost of care for one child.

c) The attached sliding fee scale was or will be effective as of <u>July 1, 2009</u>.

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d) Does the Lead Agency use other factors in addition to income and family size to determine each family's contribution to the cost of child care? (658E(c)(3)(B), §98.42(b))
Yes, and <b>describe</b> those additional factors:
⊠ No.
<b>3.5.2</b> Is the sliding fee scale provided as Attachment 3.5.1 used in <u>all</u> parts of the State? (658E(c)(3)(B))
Yes.  No, and other scale(s) and their effective date(s) are provided as Attachment 3.5.2.
<b>3.5.3</b> The Lead Agency may waive contributions from families whose incomes are at or below the poverty level for a family of the same size, (§98.42(c)), and the poverty level used by the Lead Agency for a family of 3 is: <u>Effective 7/1/09</u> , the maximum income for a family of 3 to be eligible for TCC, ARCO, and ACC in \$2,587/month.
The Lead Agency must select ONE of these options:  ALL families with income at or below the poverty level for a family of the same size ARE NOT required to pay a fee.  ALL families, including those with incomes at or below the poverty level for families of the same size, ARE required to pay a fee.  SOME families with income at or below the poverty level for a family of the same size ARE NOT required to pay a fee. Describe these families:
In Tennessee, only eligible families transitioning off of TANF and non-TANF families share in the cost of child car through an assigned parent co-pay fee. TANF families (very low income or no income) are not assigned a parent co-pay fee.
<b>3.5.4</b> Does the Lead Agency allow providers to charge parents the difference between the maximum reimbursement rate and their private pay rate?
⊠ Yes.
☐ No.
<b>3.5.5 Describe</b> how the co-payments required by the Lead Agency's sliding fee scale(s) are affordable: (§98.43(b)(3))
Assignment of co-pay fees is based on the non-TANF family's gross monthly household income. The fees in Attachment Part 3.5.1., Parent Income Eligibility and Co-pay Fee

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Table FY 2009/2010 are shown in weekly amounts. These fees are based on a percentage of gross monthly income against a percentage of the state median income ranging 'up the ladder' in 21 tiers to ensure the tiers to ensure the tiers graduate in very small steps. The minimum tier in all family sizes start at 10 % of the state median income with each tier increasing by 2.5 % to the maximum at 60 % of the state median income. Fees are based on the mid-point of each 2.5 % range in income to minimize the effect of the lower end of each tier paying a significantly higher proportion than the higher end of each tier. The mid-points start at 2% in the first tier and range up to 8.8% in the 21<sup>st</sup> tier. In effect, the minimum tier for a family of two pays as little as 1.0% of its monthly income in fees for one child while the low end of the 21<sup>st</sup> tier (paying the highest proportion) pays a maximum of 9% of their monthly incomes in fees for one child. The formula by which the parent co-pay amounts are calculated ensures that no parent pays in excess of 9% of their gross income toward the cost of care for one child.

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# PART 4 PARENTAL RIGHTS AND RESPONSIBILITIES

## 4.1 Application Process / Parental Choice

- **4.1.1 Describe** the process for a family to apply for and receive child care services (658D(b)(1)(A), 658E(c)(2)(D) & (3)(B), §98.16(k), 98.30(a) through (e)). At minimum, describe:
  - a) How parents are informed of the availability of child care services under CCDF (i.e., parental choice of child care services through a certificate or grant of contract)

Parents on the certificate program are provided with a randomized list of the providers that serve their area. The list includes all licensed providers including faith-based, family and group homes, and centers. Parents are also educated in the differences between types of care, including in-home options, and the corresponding reimbursement rate for each.

b) How parents can apply for CCDF services

The primary "door" for eligibility for child care assistance is through eligibility for Tennessee's TANF program, Families First. Families First participants with a work requirement are guaranteed child care assistance if needed to participate. The services are facilitated by the client representative, who authorizes child care when the cash assistance is approved and then works with the client throughout their time on the program to ensure they have access to the resources needed to move off the program successfully. When the Families First case is closed, clients who meet work requirements and do not exceed income standards qualify for 18 months of transitional child care assistance, and, as funding permits, an additional 12 months after that. Due to budget constraints, the number of months may be reduced to a lesser number of months or removed entirely.

c) What documentation parents provide as part of their application to determine eligibility

Reviews of eligibility for the post-TANF categories are conducted every 6 months. Income (check stubs, employer records) and school verification is provided by recipients to maintain eligibility.

d) How parents who receive TANF benefits are informed about the exception to individual penalties as described in 4.4

The client representative facilitates the child care assistance AND works with the client to ensure engagement in work activities. They are responsible for

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confirming good cause, including lack of child care, for failure to comply with TANF work requirements.

e) What steps the Lead Agency has taken to reduce barriers to initial and continuing eligibility for child care subsidies

By integrating the responsibility for setting up child care assistance into the client representative role, TANF participants are assured that they have child care addressed at the same time their TANF cash assistance is authorized. This maximized efficiency and reduces the number of contacts a client must make before they can engage in work activities.

- f) **Attach** a copy of your parent application for the child care subsidy program as **Attachment 4.1.1**.
- 4.1.2 Is the application process different for families receiving TANF?
  Yes, and describe how the process is different:
  An application for TANF is essentially an application for child care in that the individual responsible for authorizing a TANF case with a work requirement also sets up child care for that parent if needed to comply with that requirement.
  No.
- **4.1.3** What is the length of eligibility period upon initial authorization of CCDF services?
  - a) Is the initial authorization for eligibility the same for all CCDF eligible families?

Yes.

No and **describe** any variations that relate to the services provided (e.g., through collaborations with Head Start or pre-kindergarten programs or differences for TANF families):

TANF cases are reviewed for eligibility determination once a year; however, the client representative is in contact with program participants on an ongoing basis and also receives notice when a participant is non-compliant with a work requirement. For example, when a TANF participant is sanctioned for non-compliance, the client representative handles both the termination of the TANF assistance and the child care.

The non-TANF categories of child care are reviewed every 6 months.

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**4.1.4 Describe** how the Lead Agency ensures that parents are informed about their ability to choose from among family child care and group home child care, center-based care and in-home care, including faith-based providers in each of these categories.

Parents on the certificate program are provided with a randomized list of the providers that serve their area. The list includes all licensed providers including faith-based, family and group homes, and centers. Parents are also educated in the differences between types of care, including in-home options, and the corresponding reimbursement rate for each.

**4.1.5 Describe** how the Lead Agency reaches out and provides services to eligible families with limited English proficiency, including how the Lead Agency overcomes language barriers with families and providers.

The Lead Agency provides interpreter services to LEP families.

## **4.2** Records of Parental Complaints

**Describe** how the Lead Agency maintains a record of substantiated parental complaints about providers and makes substantiated parental complaints available to the public on request. (658E(c)(2)(C), §98.32))

A record of all parental and non-parental complaints is encoded into and maintained by the Lead Agency's Tennessee Regulated Adult and Child Care System (RACCS). Complaints can be made directly to a Licensing staff person in a local county office or made via a centralized Complaint Hotline. Complaints can be made by telephone, in person, electronically or by mail. Each complaint is entered into RACCS, cross-referencing a provider and sent to a DHS Program Evaluator. The Program Evaluator completes an investigation of the complaint and then the results are entered into the same system. The number and type of substantiated complaints on any individual provider is made available to the general public upon request to the local licensing office.

#### 4.3 Unlimited Access to Children in Child Care Settings

**Provide** a detailed description of the Lead Agency procedures for affording parents unlimited access to their children whenever their children are in the care of a provider who receives CCDF funds. (658E(c)(2)(B), §98.31))

Parents have unlimited access to their children enrolled in all types of care throughout the state. For regulated providers this access is documented in Tennessee State Law located at TCA 71-3-508. The Certificate Program unregulated Provider Policy Guidebook states that unregulated providers are required to "allow the parent or caretaker to see their children any time while

they are in your care" and an agreement must be signed by the providers who wish to receive subsidy payments. <u>Reference Attachment 4.3 Provider</u>
<u>Agreement</u>

# 4.4 Criteria or Definitions Applied by TANF Agency to Determine Inability to Obtain Child Care

The regulations at §98.33(b) require the Lead Agency to inform parents who receive TANF benefits about the exception to the individual penalties associated with the work requirement for any single custodial parent who has a demonstrated inability to obtain needed child care for a child under 6 years of age.

In fulfilling this requirement, the following criteria or definitions are applied by the TANF agency to determine whether the parent has a demonstrated inability to obtain needed child care:

The TANF state plan specifies that participants are exempt from the work requirements when the Lead Agency cannot provide assistance with certain support services, e.g., transportation or child care. Participants are informed at the eligibility interview and by information brochures screened and approved by the Tennessee Justice Center, Tennessee's leading legal advocacy organization for low income citizens. Please see Attachment Part 4.4, State TANF Plan of Operation-excerpt.

NOTE: The TANF agency, not the Child Care Lead Agency, is responsible for establishing the following criteria or definitions. These criteria or definitions are offered in this Plan as a matter of public record. The TANF agency that established these criteria or definitions is: The Tennessee Department of Human Services.

"appropriate child care":

Appropriate child care is that care which, at a minimum, meets the state child care licensing standards or the health and safety checklist for unregulated home providers established by the Lead Agency for these types of care arrangements.

• "reasonable distance":

The distance from the parent's home to the child care arrangement is considered "reasonable" travel when the care location is within walking distance, or access to personal, other private or public transportation is known to be available to that parent. The Child Care Certificate Program staff tries to help all parents locate child care within a distance which is reasonable to them.

"unsuitability of informal child care":

Informal or unregulated care is considered unsuitable when it does not accommodate the parent's work schedule or his/her need for reliability. The unregulated provider

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who does not meet Lead Agency's requirements for appropriate character or capability to provide safe care is considered unsuitable. Also, the care setting which does not meet the Lead Agency's minimal requirements for health and safety is considered unsuitable.

• "affordable child care arrangements":

An affordable child care arrangement is care provided by those agencies and individuals who are participating in the Lead Agency's certificate program for subsidized assistance and with whom the arrangement was selected by the parent.

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# PART 5 ACTIVITIES & SERVICES TO IMPROVE THE QUALITY AND AVAILABILITY OF CHILD CARE

## **5.1** Quality Targeted Funds and Set-Asides

Federal appropriations law has targeted portions of the CCDF for quality improvement and for services for infants and toddlers, child care resource and referral (CCR&R) and school-age child care. For each targeted fund, provide the following information.

## **5.1.1 Infants and Toddlers:**

**Note**: For the infant and toddler targeted funds, the Lead Agency must **provide** the maximum age of a child who may be served with such targeted funds (not to exceed 36 months).

The maximum age of a child served through earmarked funds is 36 months.

a) **Describe** the activities provided with these targeted funds

Infant/Toddler activities include:

- Training for Child Care Resource and Referral (CCR&R) staff
- Training for infant/toddler child care providers
- Training for Lead Agency staff and other requested groups;
- Provision of infant/toddler technical support to local CCR&R staff
- Researching the best practices in infant/toddler care
- Training for CCR&R network management staff and/or local CCR&R staff on infant/toddler topics;
- Coordination of the development of parent education materials and activities i.e., a Health and Safety DVD
- Coordination of infant/toddler care events in conjunction with local CCR&Rs
- Planning of advanced leadership training in infant/toddler care for future Tennessee Provider Child Care Provider Training (TN-CCPT) train the trainer institute
- Identify and targeting infant/toddler concerns for each CCR&R services delivery area
- Analyzing on a regular basis the ITERS-R© scores for the state to identify programs that need technical assistance
- Coordination and training on TN-CCPT training topics to target the areas of concern in infant/toddler care, specifically: Program for Infant/Toddler Caregivers(PITC)© and the Creative Curriculum area
- Analyzing on a regular basis the ITERS-R© scores for the state to identify programs that need technical assistance

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- Coordination and training on TN-CCPT training topics to target the areas of concern in infant/toddler care, specifically: Program for Infant/Toddler Caregivers(PITC)© and the Creative Curriculum ©
- Researching ways to increase infant/toddler slots statewide and the development of an infant/toddler credential©
- Researching ways to increase infant/toddler slots statewide
- Providing opportunities for Child care providers to attend a specialized 30 clock-hour orientation for caregivers of infants and toddlers provided through TECTA
- Receiving support and funding for Infant/Toddler caregivers working to complete documentation for assessment for the Child Care Development Associate (CDA), or Infant/Toddler specialization.
- Development of a statewide Infant/Toddler Credential under the direction of the Lead Agency.

The Lead Agency is utilizing the work of the Center on the Social and Emotional Foundations for Early Learning (CSEFEL) by helping early child care providers support and promote healthy social and emotional behavioral development of infants and toddlers. Four CSEFEL training modules will be used to train infant/toddler caregivers in: social emotional development within the context of relationships; responsive routines, environments; individualized intensive intervention and development of effective leadership strategies to promote effective practices in preventing and addressing challenging behavior. CSEFEL components will be embedded in the TECTA Infant/Toddler Orientation and the Infant/Toddler academic coursework (ECED 2030, Infant and Toddler Care, 3 credit hours).

#### b) **Identify** the entities providing the activities

The CCR&R Network has eleven full-time Infant/Toddler (I/T) Specialists who work under the direction and supervision of the Infant/Toddler Network Coordinator. The I/T Specialists train and work with CCR&R Specialists in the ten CCR&R sites statewide. Overall, the I/T Specialists are the primary support for child care providers, parents, and the local CCR&R staff in the area of infant and toddler care. The Tennessee Early Childhood Training Alliance (TECTA) has Specialists in nine higher educational sites that provide I/T orientation, training, mentoring and support. The Lead Agency continues to designate a DHS Director of Infant and Toddler Services to coordinate activities and provide leadership to the group.

c) **Describe** the expected results of the activities.

Expected results include: increased ITERS-R Environment Rating Scale scores- including but not limited to the health and safety scores; identifying training needs based on I/T scores and correlate TN-CCPT training topics to ITERS-R items; educate and inform parents, providers, educators, and the public of the importance of quality care for infants and toddlers. The completion of the infant/toddler credential is expected to improve the quality of care for infants and toddlers by improving the professional development of I/T caregivers.

## **5.1.2 Resource and Referral Services:**

a) **Describe** the activities provided with these targeted funds

*Infant/Toddler Services as described in 5.1.1(a). School-Age Services;* Family Child Care Focus; Health, Safety, Inclusion, Community Development; Provider Self-Assessment and Mentoring; Strengthening Families; Tennessee Child Care Provider Training Focus; Environment Rating Scale Focus. Activities include: (1) Consumer education on quality child care, distribution of statewide documents and /or DVDs on the subject of choosing quality child care; (2)maintain a current directory of community resources; provider training, resource library and loan system for child care providers; (3)targeted technical assistance, technical assistance, and consultation related to assessment scores and best practices, liaison reliable on one or more Environment Rating Scales© (ERS) to educate, support, and train child care providers on the ERS; (4) *Infant/toddler and school-age care emphasis to organize training(s)* and technical assistance specific to infant/toddler or school-age content; (5). Strengthening Families by collaborating with early care and education providers to implement the Strengthening Families approach and use the Protective Factors to form parent partnerships and build resiliency in families. Parenting Liaisons will also support parents with a focus on teen parents and parents of children whose child care is paid though the certificate program. Within each of the above services CCR&R has a goal of improving the quality of child care in Tennessee. In particular, by providing training, technical assistance, consultation, and/or resources on: (1)developmentally appropriate practices for infants through school-age; (2)inclusion of children with special needs into typical child care settings; and (3)health and safety issues in accordance with the Environment Rating Scales<sup>©</sup>, these goals will be met.

b) **Identify** the entities providing the activities

The Lead Agency provides Child Care Resource and Referral (CCR&R) services for parents, caregivers and child care providers through a

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network of ten (10) CCR&R sites across the state. Signal Centers, Inc., by contract with the Lead Agency, manages the network and provides the services statewide through sub-contracts with ten (10) private non-profit organizations, governmental agency, and/or Tennessee Higher Education Commission institutions.

c) **Describe** the expected results of the activities.

Within each of the above services CCR&R has a goal of improving the quality of child care in Tennessee. In particular, by providing training, technical assistance, consultation, and/or resources on:
(1)developmentally appropriate practices for infants through school-age;
(2)inclusion of children with special needs into typical child care settings; and (3)health and safety issues in accordance with the Environment Rating Scales©, these goals will be met.

## 5.1.3 School-Age Child Care:

a) **Describe** the activities provided with these targeted funds

Researching the best practices in the school-age arena and training CCR&R Network Management and/or local CCR&R and child care provider's staff on school-age topics.

The CCR&R delivers free training, technical assistance, and targeted technical assistance to school-age child care providers in a consistent manner statewide.

In addition, special school-age focus days and conferences are offered locally through the CCR&Rs.

The Provider Self Assessment and Mentoring Services are offered to school-age child care providers. A school-age Train-the-Trainer event was held in March 2009 for approximately 50 CCR&R Specialists on "Half a Childhood."

A 30 clock-hour School-Age Orientation is offered, through the Tennessee Early Childhood Training Alliance (TECTA), at no cost to the child care provider.

School-age developmental learning standards were adopted by the Lead Agency in 2009. These standards will be implemented effective July, 2009, with trainings and technical assistance provided to child care agencies statewide.

## b) **Identify** the entities providing the activities

Training, technical assistance, and targeted technical assistance are delivered to school-age child care providers by the CCR&R Specialists at each CCR&R local site.

School-age focus days and conferences are organized by the local CCR&R. Workshops at these events are delivered by professionals in the field of school-age care and the CCR&R Specialists and site Coordinators.

The CCR&R Network Director delivered a school-age Train-the-Trainer event, along with Network Management support that also involves training and technical assistance for the local CCR&R Specialists statewide.

The CCR&R Network Management has a School-Age Coordinator who assures consistency of delivery and support to the local CCR&Rs.

The TECTA Management along with local Site Coordinators and faculty deliver the School-age Orientation.

c) **Describe** the expected results of the activities.

It is expected that school-age child care providers will deliver quality child care services to school-age children as a result of training and technical assistance provided by the local TECTA and CCR&R management and staff. It is expected that as a result of these efforts SACERS© assessment scores and the quality of school-age care will improve.

**5.1.4** The law requires that <u>not less than 4%</u> of the CCDF be set aside for quality activities. (658E(c)(3)(B), 658G, §§98.13(a), 98.16(h), 98.51) The Lead Agency <u>estimates</u> that the following amount and percentage will be used for the quality activities (not including targeted funds) during the 1-year period: October 1, 2009 through September 30, 2010:

\$24 million (12 %)

**5.1.5 Check** each activity in Table 5.1.5 that the Lead Agency will undertake to improve the availability and quality of child care (include activities funded through the 4% quality set-aside as well as the targeted funds for quality activities). (658D(b)(1)(D), 658E(c)(3)(B), §§98.13(a), 98.16(h)). **CHECK ALL THAT APPLY.** 

Table 5.1.5 Activities to Improve the Availability and Quality of Child Care

Table 5.1.5 Activities to Improv	e the Availabi	lity and Quality of Child Ca	re
Activity	Check if undertaking/ will undertake	Name and type of entity providing activity	Check if non- governmental entity
Comprehensive consumer education	$\boxtimes$	Child Care Resource and Referral, TOPSTAR, Strengthening Families	$\boxtimes$
Grants or loans to providers to assist in meeting State and local standards			
Monitoring compliance with licensing and regulatory requirements	$\boxtimes$	Lead Agency	
Professional development, including training, education, and technical assistance	$\boxtimes$	Child Care Resource and Referral, Tennessee Early Childhood Training Alliance, TOPSTAR	
Improving salaries and other compensation for child care providers			
Activities to support a Quality Rating System	$\boxtimes$	Child Care Resource and Referral, Tennessee Early Childhood Training Alliance, TOPSTAR, TN-ELDS, School-Age Developmental Learning, Program Assessment, Tennessee Report Card and Star-Quality System, Star-Quality Advisory Council, Strengthening Families	$\boxtimes$
Activities in support of early language, literacy, pre-reading, and early math concepts development	$\boxtimes$	Child Care Resource and Referral, Tennessee Early Childhood Training Alliance, TOPSTAR, TN- ELDS	
Activities to promote inclusive child care	$\boxtimes$	Child Care Resource and Referral, Tennessee Early Childhood Training Alliance, CSEFEL,	$\boxtimes$

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Activity	Check if undertaking/ will undertake	Name and type of entity providing activity	Check if non- governmental entity
		Tennessee Early Intervention System, DOE IDEA Part C, Statewide Interagency Coordinating Council	
Healthy Child Care America and other health activities including those designed to promote the social and emotional development of children		CSEFEL, Child Care Resource and Referral, Strengthening Families, Tennessee Early Childhood Training Alliance	$\boxtimes$
Other quality activities that increase parental choice, and improve the quality and availability of child care. (§98.51(a)(1) and (2))		Child Care Resource and Referral, Strengthening Families, and Parenting Liaisons	$\boxtimes$

**5.1.6** For each activity checked in Table 5.1.5, a) **describe** the expected results of the activity. b) If you have conducted an evaluation of this activity, **describe the results**. If you have not conducted an evaluation, **describe** how you will evaluate the activities.

#### Comprehensive consumer education:

Information from United Way of America's **Born Learning** campaign is being promoted to link to resources and materials that are being used statewide to promote awareness of quality child care and child development. This information may be found at <a href="https://www.bornlearning.org">www.bornlearning.org</a>.

Building on Born Learning resources, a DVD will be distributed to parents entitled "Building Minds Building Futures." It contains information for parents to help develop their child's language skills as well as how to look for quality child care. The DVD was developed in collaboration with United Way of Greater Chattanooga, the Lead Agency, TOPSTAR and other community agencies. A Critical Information Flyer accompanies the Born Learning DVD to further instruct parents on what to look for when choosing child care and the resources available to support their decision. The DVD is distributed to the CCR&R Staff, Child Care Licensing Staff, and to the Child Care Certificate Program offices that, in turn, use them in their consumer education efforts with parents and the community.

The CCR&R provides information and instruction to parents on a variety of quality issues such as licensed child care options; understanding provider Report Cards; looking for Starrated providers; making visits to child care providers; how to observe the caregivers, teachers and the children; services of the Child Care Resource & Referral Centers. CCR&R staff also provides one-on-one consumer education, information, and topic specific brochures to parents that they encounter at birth fairs and via parent referrals.

Tennessee has also created Internet sites developed to help parents make better-informed decisions regarding their child's care. A full listing of all regulated child care providers along with specific information regarding the provider's Star Quality Component Scores can be found at <a href="http://www.state.tn.us/humanserv/childcare/providers-map.htm">http://www.state.tn.us/humanserv/childcare/providers-map.htm</a>. An additional web site that parents can use to find child care providers by location can be accessed at <a href="http://tnetgis.state.tn.us/childcare/Disclaimer.htm">http://tnetgis.state.tn.us/childcare/Disclaimer.htm</a>. A full description of Tennessee's Star Quality Program can be accessed at <a href="http://tnstarquality.org">http://tnstarquality.org</a>.

Additionally Tennessee's Outstanding Providers Supported Through Available Resources (TOPSTAR) is building on some of the work done in the Tennessee Infant/Toddler Initiative and has developed several products for distribution to providers and parents. As a result of the two-year grant received from the Better Baby Care Campaign and ZERO TO THREE, TOPSTAR continues to work with the community around infant/toddler issues. This public relations campaign introduced to parents the importance of "playing to learn" with their infants and toddlers.

It is expected that parents will have the information and support necessary to make informed choices concerning the care of their children including how to choose quality child care. Parents will also have materials to help promote their child's health, safety and developmental needs.

#### Improving the monitoring of compliance with licensing and regulatory requirements:

Tennessee has 141 state employee Licensing Program Evaluator positions, 17 Licensing Field Supervisor positions, 3 Licensing Program Supervisor positions, and one Licensing Director position that is funded with CCDF dollars. The Lead Agency continues to implement its unannounced visit policy to require a minimum of four (4) to six (6) unannounced visits (depending upon the agency's Star Rating) and at least one (1) announced visit per year for each licensed provider in the state. In addition, the Program Evaluators perform a minimum of one (1) additional unannounced visit per year for agencies that provide child care transportation services. They also complete complaint investigations that have resulted from calls to the state's Child Care Complaint Hotline or that have been received directly by representatives of the local licensing offices. By frequent monitoring of providers' compliance with state regulations, the Lead Agency provides close regulatory oversight of the industry, identifies providers in need of assistance from the Child Care Resource and Referral Network, and brings legal enforcement action when necessary.

It is expected that the health and safety of Tennessee's children in child care will continue to be assured.

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#### Professional development, including training, education, and technical assistance:

CCDF funds will be used to continue the Tennessee Early Childhood Training Alliance (TECTA), a comprehensive, articulated provider training system provided through agreements with Tennessee Board of Regents (TBR) colleges and universities. TECTA provides funds for a free 30-hour orientation for providers and assists providers with tuition supplements for college-level courses leading to the Child Development Associate (CDA) credential and NAEYC accreditation. TECTA orientations are offered in the fields of center-based (focus on preschool-age), administration, infant/toddler, school-age and family child care. Providers are also assisted with mentoring and financial aid to encourage them to obtain a CDA after completing five college-level classes. Providers are encouraged and financially supported in the continuance of their education towards an Associate, Bachelor and Master and/or Doctorate degree.

The Tennessee Early Childhood Program Administrator Credential (TECPAC) is awarded to child care program administrators (center, family, group) who have demonstrated the specific competencies for effective leadership management through academics, experience, academy attendance, and portfolio assessment. Funding is provided by the Lead Agency to Tennessee State University for the development, oversight, and financial supports to child care program administrators for the TECPAC.

The CCR&R Network manages ten (10) Child Care Resource & Referral (CCR&R) sites across the state to assist providers in improving their programs and practices, assuring good health outcomes for children in care and successfully including children with special needs in their programs. Network management ensures the CCR&R sites provide consistent services to child care providers. CCR&R manages the Tennessee Child Care Provider Training (TN-CCPT) program including curriculum development and train-the-trainer institutes for CCR&R specialists, who in turn provide free training on a variety of research-based topics for providers. CCR&R specialists also provide on-site targeted technical assistance, lending library resources and telephone consultation. This data is collected quarterly.

CCR&R and TECTA are working together to encourage providers to attend the 30-hour free orientation and to continue in college-level courses to obtain a CDA. The CCR&R Network also provides targeted technical assistance following TN-CCPT training so that providers can apply principles learned during training to practical implementation in their classrooms. The trainings offered by CCR&R, TECTA orientations, the TECPAC, and college-level courses offer the child care provider a comprehensive system of professional development.

Tennessee's Star Quality Advisory Council met to recommend changes in the Evaluation and Report Card component criteria to enhance professional development; adopted changes went into effect January, 2009. One of the changes is implementation of a Professional Development Plan (PDP) for all staff including directors that will focus training on specific goals related to the field of practice. These changes will be made and report card data will evaluate the participation of providers in the use of the PDP and selection of appropriate training for staff.

Expected results from this professional development system are an increase in the number of child care providers receiving their Child Development Associate Credential, TECPAC, and an increase in the number of providers choosing to attend academic classes in early childhood development and education. This data is collected quarterly by TECTA.

Providers will be able to apply learned principles of child development and care in classrooms. The measurement for these outcomes will be increased assessment scores for providers on the Environment Rating Scales© resulting in increased Star ratings.

Through the implementation of the Strengthening Families (SF) model, CCR&R staff are using Children's Trust Fund and Department of Children's Services linkages to participate in Community Advisory Boards, local child care partner meetings, presentations at child welfare conferences, and other Child Abuse and Neglect prevention partner efforts. The entire CCR&R network (130+ individuals) has been trained by Prevent Child Abuse Tennessee in a Strengthening Families train-the-trainer event. The CCR&R staff in turn are providing at least 40 trainings across the state on the 8 modules of SF to train child care providers, community advocates, and parents each quarter. In addition to workshop training, child care providers are receiving technical assistance in completing the SF self-assessment, implementing SF practices facility-wide, engaging parents, setting up community cafes, and promoting parent engagement.

Other provider measurements include tracking the number of 30-hour orientations provided along with the number of providers attending levels classes and completions of CDA Credentials and TECPACs. Licensing will monitor the provider's use of Professional Development Plans (PDP).

Outcomes for children will include increases in quality of care including health and safety, and increased readiness for school and a safer learning environment. The measurement for these outcomes will be increased assessment scores for providers on the Environment Rating Scale© resulting in increased Star ratings. Tennessee is conducting a study of the impact of the current STAR ratings on the school readiness of preschool-aged children.

## Activities to support a Quality Rating System

For 2001-2008, the Evaluation and Report Card Program measured the areas of licensing compliance, staff development, family involvement, ratio and group size, staff compensation, business management and assessment of a healthy, safe environment for children to promote learning and school readiness. As a result of an overall improvement of Report Card scores for child care centers, family child care homes, and group homes, the component areas were modified effective January, 2009. Compliance with licensing regulations became the threshold by which child care agencies would enter into the quality rating system. The licensing compliance component has been replaced with Developmental Learning.

Additionally, content outlined in the other components of this section describe the activities to support Tennessee's Quality Rating System.

## Activities in support of early language, literacy and numeracy development:

Through a federal Department of Education grant to the University of Tennessee at Chattanooga, Project REEL (Resources for Early Educator Learning) worked with the statewide CCR&R Network, Signal Centers and the Siskin Children's Institute to add an additional specialist to each of the 10 CCR&R agencies across the state. The specialists were trained to provide sustained, intensive and research-based professional development to child care providers. These strategies have now been embedded into the structure of CCR&R trainings and on-site targeted technical assistance to foster cognitive and social development to prepare children for school success, promote developmentally appropriate curricula and learning domains to enrich child development and support appropriate social development, emotional behavior, and early language, literacy, and numeracy competencies.

Tennessee's Early Learning Developmental Standards (TN-ELDS), which cover all domains of early learning to include early language, literacy and numeracy, have been completed, printed and distributed to all child care providers. Copies are also available for loan through the local CCR&R and TECTA sites. The Lead Agency's Child Care Licensing staff can access the TN-ELDS via notebook computers and share the content with child care providers during licensing visits. The CCR&R Network has trained its entire staff, who, in turn, are training providers through introductory classes on the usage of the TN-ELDS. TECTA and CCR&R are also integrating TN-ELDS in all facets of Tennessee's system of professional development. The Department of Education has also trained staff working in Head Start, Even Start and DOE classrooms. The Department of Health is collaborating with DHS and DOE to support understanding and use of the TN-ELDS. The objective of these TN-ELDS related activities is to promote understanding of child development, learning expectations and performance indicators so that caregivers will understand how children learn and how to tailor child care early education practices to meet children's specific needs.

Head Start performance Standards & Environment Rating Scales © served as resources to Tennessee Early Childhood professionals in developing the TN-ELDs, which are aligned with the Tennessee K-12 curriculum standards. Head Start outcomes & Pre-K curricula correlate with TN-ELDs. All Pre-K curricula must be correlated with the TN-ELDs.

The Star Quality Advisory Council recommended that TN-ELDS become a component of the Report Card and Star Quality Program. With the January, 2009 revision of the Report Card, a Developmental Learning component was added. This component includes the TN-ELDS (birth through age 60 months) and school-age developmental learning guidelines (60 months through age 12). Expected results are that there will be an increased understanding of child development and activities and curricula appropriate for a child's age will increase. Star quality data will be used to determine the outcome.

It is expected as a result of these early learning activities that children will show an increased readiness for school. This will be measured through the child outcomes study currently being implemented by a contractor with the Lead Agency – the University of Tennessee at Knoxville.

It is also expected that parents and providers will have a better understanding of child development and the activities that promote appropriate development. The Star Quality Advisory Council recommended increased criteria for the Parent/Family component of the Report Card and Star Quality Program that includes individual and group meetings with parents and distribution of materials so that parents can supplement and enhance the child's learning activities at the child care.

#### Activities to promote inclusive child care:

The Child Care Resource & Referral (CCR&R) Network partners with the Department of Health and the Tennessee Council on Developmental Disabilities to provide an array of services to promote inclusive child care. The CCR&R Network has a statewide Infant/Toddler, Health, and Inclusion Coordinator who works with individual CCR&R specialists, local health departments, Department of Education staff and other private and non-profit organizations, working with young children, to disseminate the latest information on best practices for inclusion. The Health, Safety and Inclusion Coordinator promotes health and inclusion activities at the CCR&R sites designed to help providers and parents locate and utilize available local, state and federal resources that make the inclusion of children with disabilities and/or special health care needs successful. The CCR&R Network Coordinator and one of the Infant/Toddler Specialist (who holds a Master's degree in Special Education) also works collaboratively with Tennessee's Early Intervention System (TEIS) to help parents locate resources for infants and toddlers up to 2 years of age with special educational needs. The CCR&Rs provide on-site consultation and technical assistance, upon request, to providers, and lend materials from their resource library, including adaptive equipment and other tangible resources, to assist in the inclusion of children with special needs. The Lead Agency serves on the Department of Education's Interagency Coordinating Council and a task force to promote funding for IDEA Part C activities.

Expected outcomes are an increase in the number of children with special needs attending child care and improved health and safety practices for this child care population. Children with special needs will be prepared for entrance into the school system through transitions made early in child care and in pre-K classrooms. Tennessee will demonstrate a strong need for, and commitment to, systematically improving efforts to better prepare personnel to work effectively in inclusive preschool settings.

#### Healthy Child Care America:

Established through the former Healthy Child Care America grant, the Department of Health (DOH) in collaboration with Department of Human Services provides training and partial funding for the CCR&R Specialists (health consultant) who focus on health services. The

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Healthy Child Care America grant will be increased by an additional \$50,000.00 (2009-10). The purpose of the program is to effectively integrate health activities into services for children in early childhood. CCR&R Network's statewide Network Coordinator also works closely with DOH staff to collaborate with local Health Departments, providers, parents and other community agencies involved with the health and safety of children to promote best practices.

DOH is preparing to enhance healthy child initiatives through the State Early Childhood Comprehensive Systems (SECCS) grant. The goals of ECCS are to assure that all children are healthy and ready to learn at school entry. The working objectives for FFY 2009 – 2010 are to:

- Continuously develop the effective relationship between partners by focusing on the state plan, defining the work and tracking the progress of ECCS.
- Expand the partnership to include agencies concerned about the mental health needs of young children, including developmental assessment agencies.
- Include at least 5 non-traditional partners that address issues related to children ages 0-5 years with special health care needs.
- Recruit and involve families in the regional and local activities to support the work of the partnership and address regionally identified needs to assure that children are healthy and ready to learn upon school entry.

The ongoing work of ECCS is integrated into the action plans presented in the implementation plan which builds upon current ECCS strengthens and resources. Some of the current initiatives are:

- Participation in home visiting programs that educate and empower families to access services in their community; statewide maternal depression assessment training; statewide breastfeeding training to all home visitors, and smoking cessation training for all home visitors;
- Partnering with the Tennessee Head Start Oral Health Forum to improve parent participation in their child's oral health visits, educate families on the importance of oral health as it relates to healthy pregnancy outcomes, and enhance and implement oral health programming;
- Collaboration with the Governor's Books from Birth Foundation to increase the number of children exposed to books and reading, beginning at birth through age five;
- Participation in the Tennessee Council of Developmental Disabilities and the Vanderbilt Kennedy Center's Early Childhood Training Initiative to determine training needs among Tennessee's child care providers and propose areas to be strengthened;
- Planning to sustain the work of ECCS by institutionalizing the Pyramid Teaching Model training completed in February 2009. This model includes an assessment tool to measure implementation of the model in programs for young children.

It is expected that child care providers, in partnership with families, will promote the healthy development of young children in child care. Additionally, an increased access to preventive health services and safe physical environments for children is expected from this

collaboration. Health and safety scores are expected to improve on the Environment Rating Scales©.

# Other quality activities that increase parental choice, and improve the quality and availability of child care:

Using CCDF funds, the Lead Agency will continue to fund and administer the state's quality rating and improvement system entitled The Tennessee Report Card and Star Quality Program. This quality rating and improvement system, by state statute, requires all licensed child care providers to undergo an annual evaluation and to receive a report card detailing the results of the evaluation. The report card must be posted in a prominent location within all licensed agencies to help parents identify and choose a quality provider. Agencies that exceed minimum licensing standards receive a 1-Star, 2-Star, or 3-Star rating and are eligible to receive a rated child care license. Providers who are enrolled in the CCDF certificate program and receive a rated child care license (1-, 2-, or 3-Stars), may participate in a Star Quality bonus program that is based upon a percentage of the appropriate base provider rate.

CCDF funding for the Report Card and Star Quality Care Program also covers the staffing and training of the Child Care Assessment Units that conduct annual classroom level assessments of licensed child care agencies using the Environment Rating Scales© (ERS). Center directors/owners and family and group child care owners interested in this effort are taught to do a self-assessment using the ERS© and implement changes in their program. Agencies participating in the Child Care Certificate program are eligible for a grant used to purchase equipment and/or materials that support the improvement on lowest-scoring items of the ERS©.

The University of Tennessee will continue to support the Lead Agency with updates to Environment Rating Scales© notes, and provision of training and technical assistance to the Program Assessors. The University will continue to collect data from assessments for evaluation of the Report Card and Star Quality Program. University staff will have close communication with the CCR&R Network so child care providers and parents may benefit from assessment information.

The Star Quality Advisory Council made numerous changes to the report card component criteria to increase the requirements for director's qualifications, professional development planning, parent and family involvement. Those changes went into effect January, 2009.

Parenting Liaisons will work to promote parent leadership and advocacy for quality child care through community cafes and training on the Strengthening Families Protective Factors. Parenting Liaisons will also seek out teen parents and parents of children using the Certificate Program to increase their knowledge of quality child care and how to advocate for quality care for themselves and other parents.

The expected outcome is that provider assessment scores will continue to improve through the offering of training, mentoring, and technical assistance targeted to improve low scores. Agency star ratings will improve indicating an increase in the quality of the care given to children attending child care in the state of Tennessee.

Expected outcome of Strengthening Families efforts to promote parent leadership will increase the access to quality child care for all families, especially teen parents and parents of children in the Certificate Program.

# <u>5.2</u>

Early Learni	ing Guidelines and Professional Development Plans
best describes research-base <b>NOTE: Chec</b>	of Voluntary Early Learning Guidelines. Indicate which of the following is the current status of the State's efforts to develop, implement, or revise and early learning guidelines (content standards) for three-to-five year-olds. Cok only one box that best describes the status of your State/Territory's -year-old guidelines.
	<b>Planning</b> . The State is planning for the development of early learning guidelines. Expected date of plan completion:If possible, respond to guarations 5.2.2 through 5.2.4
	to questions 5.2.2 through 5.2.4. <b>Developing</b> . The State is in the process of developing early learning guidelines. Expected date of completion:If possible, respond to questions 5.2.2 through 5.2.4.
	<b>Developed</b> . The State has approved the early learning guidelines, but has not yet developed or initiated an implementation plan. The early learning guidelines are included as <b>Attachment 5.2.1</b> , if available.
	Implementing. In addition to having developed early learning guidelines the State has embarked on implementation efforts which may include dissemination, training or embedding guidelines in the professional development system. The guidelines are included as Attachment 5.2.1.
	<b>Revising</b> . The State has previously developed early learning guidelines and is now revising those guidelines. The guidelines are included as <b>Attachment 5.2.1</b> .
	Other. Describe:
imple date o guidel Effective s training v	scribe the progress made by the State/Territory in developing, menting, or revising early learning guidelines for early learning since the of submission of the 2008-2009 State Plan. Efforts to develop early learning lines for children birth to three or older than five may be described here.  July 1, 2009, early childhood program partners launched an interactive website for child care providers (with unlimited 24/7 access). The on of this interactive website is one of the tools planned to help providers
fully unde standards	erstand and implement the standards. The partners working on the standards, website, and other materials include: the Tennessee State Departments of and Human Services, the Child Care Resource and Referral Network, the

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Tennessee Early Childhood Training Alliance, the Tennessee Head Start Collaboration Office, representative faith-based child care providers, Tennessee Child Care Provider Training representative, Infant/Toddler Specialist, Community Based (United Way) Child Care provider, and representative of Tennessee Early Intervention System. Each program has incorporated the TN-ELDS into its system of early childhood services and has committed to assist in the statewide training strategy to assure that all practitioners of early care and education are trained on the appropriate and continuous usage of the TN-ELDS.

The Tennessee School-Age Developmental Standards were developed to supply guidance for child care providers regarding the continuum of developmental milestones for children, from Kindergarten – Eighth grade. These standards were compiled specifically for use in child care, versus educational, environments. These standards are based upon current research and address Social-Emotional, Physical and Cognitive aspects of the development of school-age children. These standards are intended to serve as a tool to inform choices and planning regarding activities, environment, program structure, staffing, materials and supplies in child care programs serving school-age children. The Department of Human Services established an advisory committee early in 2009 for the purpose of providing recommendations regarding the implementation of the newly promulgated edition of the Report Cards and Rated Licensing Rules. This committee is comprised of child care experts representing the broad spectrum of individuals and organizations who partner throughout the state to support high quality care for our children and included: Project TOPSTAR (family child care), Tennessee Department of Education, Child and Adult Care Licensing, Program Assessment, Tennessee Family Child Care Alliance, Tennessee Child Care Association, Tennessee School-Age Care Alliance, Child Care Resource and Referral, Tennessee Child Care Provider Training, Tennessee State University Center of Excellence for Learning Sciences, Tennessee Early Childhood Training Alliance, University of Tennessee Social Work Office of Research and Public Service, YMCA School-Age Services.

,	eveloped, are the guidelines aligned with K-12 content standards or other ards (e.g., Head Start Child Outcomes, State Performance Standards)?
$\boxtimes$	Yes. If yes, identify standards:
	These voluntary guidelines were developed in partnership with the Department of Education to cover the areas of early literacy, speech, language, math, science, creative arts, social emotional development, and physical development and are aligned with the State's K-12 learning standards.
	No.

	c) If de	eveloped,	are the guideli	ines aligned wi	th early childh	nood curricula?	
			Yes. If yes, des	scribe:			
Learning Dev	elopmei	ntal Stand	lards (TN-ELD		prehensive cu	riculum with the Earl urricula can be found .doc.	
		No.					
	d) Hav	e guideli	nes been devel	oped for childr	en in the follo	owing age groups:	
		Birth to	five. Guideline	nes are included es are included idelines are inc	as Attachmer	nt 5.2.1	
	site ad	dress (gu	delines must s	vailable on the till be attached /ci/earlychildh	to Plan):	the appropriate Web	
				_		e guidelines for three math concepts?	-
		Yes.					
		No.					
		_		en three-to-fivo itive, physical	-	dress other domains eative arts?	
		Yes. If	yes, <b>describe</b> .				
		interacti concept,	ons/culture, hi self control, co ution, health sto	ooperation, gr	hy, economics, oss motor, fine	human s, creative arts, self e motor, movement & ersonal and social	
		No.					
5.2.3 I	mplem	entation	of Voluntary	Early Learnin	ıg Guidelines.	•	
			ch strategies th	ne State used, o	or expects to us	se, in implementing i	ts

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d) **Describe** how cultural, linguistic and individual variations are (or will be) acknowledged in implementation.

Tennessee's Early Learning Developmental Standards (TN-ELDS), which cover all domains of early learning to include early language, literacy and numeracy, were completed, printed and distributed to all child care providers. Copies are also available for loan through the local CCR&R and TECTA sites and electronically. The CCR&R Network has trained its entire staff, who, in turn, are training providers through introductory classes on the usage of the TN-ELDS. TECTA and CCR&R are also integrating TN-ELDS in all facets of Tennessee's system of professional development. TECTA provided TN-ELDS information and implementation planning for 50 higher education faculty and administrators via a

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Higher Education Institute. TECTA introduced TN-ELDS into the entry level orientation coursework and the professional development lattice system. All Child Care Licensing Staff will be trained on the TN-ELDS.

The Department of Education has also trained staff working in Head Start, Even Start and DOE classrooms. The Department of Health is collaborating with DHS and DOE to support understanding and use of the TN-ELDS. The objective of these TN-ELDS related activities is to promote understanding of child development, learning expectations and performance indicators so that caregivers will understand how children learn and how to tailor child care early education practices to meet children's specific needs.

e) Describe how the diversity of child care settings is (or will be) acknowledged in implementation.

The TN-ELDS have been written in such a way that providers can take into account and tailor the curriculum to community, local, cultural, linguistic and individual variations, as well as the specific diversity of the child care setting.

Materials developed to support implementation of the guidelines are included as **Attachment 5.2.3**. If these are available on the web, provide the appropriate Web site address (guidelines must still be attached to Plan):

Operational August, 2009 – www.TNELDS-TRAINING.COM

http://70.90.99.243/TECTA\_Elearning/frontpage.htm (6/1-7/31/09 only)

(Guidelines - http://tennessee.gov/education/ci/earlychildhood/index.shtml)

# **5.2.4 Assessment of Voluntary Early Learning Guidelines.** As applicable, **describe** the State's plan for:

- a) Validating the content of the early learning guidelines
- b) Assessing the effectiveness and/or implementation of the guidelines
- c) Assessing the progress of children using measures aligned with the guidelines
- d) Aligning the guidelines with accountability initiatives

Written reports of these efforts are included as **Attachment 5.2.4**. If these are available on the web, **provide** the appropriate Web site address (reports must still be attached to Plan):

The TN-ELDS content has been validated by the Department of Education through the Board of Education. A Developmental Learning Component has been added to Tennessee's Report Card; this component includes both the TN-ELDS and school-age developmental learning guidelines. (No Attachment Needed)

	or Professional Development. Indicate which of the following best
describes the	current status of the Lead Agency's efforts to develop a professional
development	plan for early childhood providers that includes all the primary sectors:
child care, He	ead Start, and public education. NOTE: Check ONLY ONE box that best
	e status of your State's professional development plan.
	Planning. Are steps underway to develop a plan?
	Yes, and <b>describe</b> the entities involved in the planning
	process, the time frames for completion and/or implementation, the
	steps anticipated, and how the plan is expected to support early
	language, literacy, pre-reading and early math concepts.
	∐ No.
	<b>Developing</b> . A plan is being drafted. The draft or planning documents
	are included as <b>Attachment 5.2.5</b> , if applicable.
	<b>Developed</b> . A plan has been written but has not yet been implemented.
	The plan is included as <b>Attachment 5.2.5</b> , if applicable.
	<b>Implementing</b> . A plan has been written and is now in the process of
	being implemented, or has been implemented. The plan is included as
	Attachment 5.2.5.
	<b>Revising.</b> The State previously developed a professional development
	plan and is now revising that plan, or has revised it since submitting the
	08-09 State Plan. The revisions or the revised plan are included as
	Attachment 5.2.5.
$\boxtimes$	Other. Describe: Has Been Implemented.
	Tennessee's system of professional development was initiated in 1992 with
	the creation of TECTA, revised in 1999 with TOPSTAR implementation,
	was revised again in 2003 when the CCR&R statewide network was
	created, and has continued to grow to support child care provider's
	professional development needs.
	be the progress made by the State in planning, developing, implementing, or
_	he professional development plan since the date of submission of the 2008-
2009 Stat	e Plan.
Ti i	1.4
	d Agency's system of professional development was originally developed in
conjuncti	on with the Governor's Child Care Task Force, the Departments of Health

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and Education, Council on Developmental Disabilities, Tennessee Higher Education Commission institutions, child care providers and other early childhood education specialists. The system addresses all categories of licensed providers and provides a continuum of training and education. The majority of training and professional

development is offered free of charge or at minimal cost and at times that are convenient for the provider. The state sanctioned delivery of professional development services is accomplished through a series of contracts and sub-contracts with the colleges and universities of the Tennessee Higher Education Commission system, the CCR&R Network and the Tennessee Family Child Care Alliance. The state maintains quality assurance by participating in the approval of all trainers involved in the system, as well as monitoring the consistency of the training content. The type and amount of training is monitored and tracked through the Child Care Licensing unit and is part of the statutorily required annual provider report card evaluation.

All of the following are funded by the Lead Agency to provide professional development to licensed child care providers:

#### **Training**

Specialized training is provided through the approved Tennessee Child Care Provider Training (TN-CCPT) format. This format focuses on five content areas (as identified by the Tennessee Department of Human Services) – Administration, Child Development, Early Childhood and Childhood Education, Health and Safety, and Developmentally Appropriate Behavior Management.

Signal Centers, management contractor for the Tennessee Child Care Resource and Referral Network – provides annual Train-the-Trainer Institutes for CCR&R's. This facilitates high-quality, consistent training resource availability. A few examples of Train-the-Trainer Institutes include Technical Assistance Strategies to Enhance Effectiveness, "PlaySafe! BeSafe!" (Fire Safety), Practical Strategies for Helping Children Develop Positive Character, Service Learning, Enhancing Knowledge about the Environment Rating Scales©, and PITC – Part II (Modules III, IV), Strengthening Families, Math & Literacy Essentials, and Tennessee Developmental Standards.

A consistent delivery system comprised of training series and workshops are provided throughout the CCR&R service areas. Each of the ten CCR&R sites provide a combination of delivery systems in each content area that allows providers to individualize training to meet their personal and programmatic needs, as well as to fulfill their training obligations for licensure in a timely and appropriate manner. Disseminating training in this fashion empowers providers to gain knowledge in the most beneficial and helpful manner.

Additional information can be accessed through the CCR&R website: http://www.tnccrr.org/

#### Tennessee Early Childhood Training Alliance (TECTA)

Research shows that quality early childhood education plays an important role in preparing children to enter school ready to learn. The key to quality programs is the preparation of personnel with whom young children spend a significant portion of their time. The TECTA statewide training system is based upon the belief that early childhood education personnel need

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professional knowledge and skills to provide appropriate care for young children. The primary goal is improving the quality of early childhood education by providing articulated preparation programs.

TECTA is managed by Tennessee State University - Center of Excellence for Learning Sciences. TECTA provides the statewide professional development training and education system linked with the Tennessee Board of Regents (TBR) state university and community colleges of Tennessee. TECTA provides training, CDA National Credential scholarship support, technical assistance, career development advising, and academic support to any student currently working in a child care agency and working toward a degree or certificate in Early Childhood Education.

The education and preparation lattice concept of the TECTA program provides the means to ensure early childhood teacher and caregiver preparation and recognition including efficient articulation between Certificate, CDA Credential, Technical Certificate, Associate Degrees at the 13 TBR 2-year institutions, and tuition assistance for advanced Early Childhood Education degrees. In addition, the Tennessee Early Childhood Program Administrator Credential includes academic coursework, experiential learning, and portfolio assessment for child care administrators.

The TECTA Orientation course is a free 30 clock hours of specialized training based upon core professional knowledge. TECTA Orientation is offered in five specializations; Infant/Toddler, Center-Based (Pre-School), School-Age, Family Child Care, and Administration. Students who successfully complete the 30 hours receive a TECTA Orientation Certificate indicating receipt of formalized training

The TECTA Orientation provides the academic gateway to the career lattice system of early childhood academic courses toward earning a CDA National Credential awarded by The Council for Professional Recognition. These courses follow NCATE/NAEYC standards and articulate into the Associate's degree in Early Childhood Education. All academic courses are available on-line, on the various campus sites, or in local community sites accessible by each of the state's ninety-five counties. TECTA was instrumental in formulating and implementing the statewide A.A.S. Early Childhood Education degree and is working on articulation agreements with 4-year institutions within the TECTA TBR system to implement articulated pathways for both the B.S. Early Childhood Education degree (with teacher licensure) and B.S. Child Development Degree.

Course work, is based upon national standards for preparation of professional early childhood personnel. The program provides articulation between post-secondary certificate and degree programs when students meet higher education admission requirements.

There are consortia of higher education institutions that serve child care providers in all ninety-five Tennessee counties. Additional information can be obtained through the TECTA website, <a href="http://www.tecta.info">http://www.tecta.info</a>.

# Project TOPSTAR (Tennessee's Outstanding Providers Supported Through Available Resources)

TOPSTAR is a program within the Tennessee Family Child Care Alliance providing technical assistance and professional development to family child care providers by offering highly trained and highly motivated mentors to assist new providers or those who want to improve the quality of their care. Working together as a team, the mentor guides the protégé to set three goals. Once the goals have been identified, the mentor/protégé team narrows the focus of their 20-hour commitment. Through hands-on, one-on-one availability, the experience and knowledge shared by the mentoring provider enables the protégé to bypass some of the pitfalls of the childcare business. The protégé, in turn, offers the mentor contagious enthusiasm as her growing skills builds confidence and professional self-esteem. Such guidance has proven to be an invaluable resource resulting in the improvement of the quality of care for children, which is our ultimate goal. Additional information is located on the TOPSTAR website, http://tfcca.homestead.com/topstarhome.html.

# b) If developed, does the plan include (Check EITHER yes or no for each item):

	Yes	No
Specific goals or desired outcomes	$\boxtimes$	
A link to Early Learning Guidelines	$\boxtimes$	
Continuum of training and education to form a career path	$\boxtimes$	
Articulation from one type of training to the next	$\boxtimes$	
Quality assurance through approval of trainers	$\boxtimes$	
Quality assurance through approval of training content	$\boxtimes$	
A system to track practitioners' training	$\boxtimes$	
Assessment or evaluation of training effectiveness	$\boxtimes$	
State Credentials – Tennessee Early Childhood Program Administrator Credential (TECPAC)	$\boxtimes$	
Specialized strategies to reach family, friend and neighbor caregivers		$\boxtimes$

c) For each Yes response, reference the page(s) in the plan and briefly describe.

Please reference the descriptions of CCR&R, TECTA, TECPAC, TOPSTAR, and the Developmental Learning Standards in this section and in sections 5.2.1, 5.2.2., 5.2.3, and 5.2.4.

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d) For each **No** response, **indicate** any plans the Lead Agency has to incorporate these components.

The Lead Agency is in the planning stage of utilizing the CCR&R locations to provide resources to the family, friend, and neighbor caregivers. In addition, the Child Care Certificate Program staff can serve as a resource broker for these caregivers.

e) Are the professional development opportunities described in the plan available: **Note: Check <u>either</u> yes or no for each item):** 

	Yes	No
Statewide		
To Center-based Child Care Providers	$\boxtimes$	
To Group Home Providers	$\boxtimes$	
To Family Home Providers		
To In-Home Providers		$\boxtimes$
Other (describe):		

f) **Describe** how the plan addresses early language, literacy, pre-reading, and early math concepts development.

Please see descriptions throughout Section 5 regarding the use of research-based curriculum development; literacy and numeracy initiatives; the Early Learning Developmental Standards; the Environment Rating Scales© items pertaining to early language; literacy, pre-ready, and numeracy; and the Report Card and Star-Quality Program regarding professional development.

g) Are program or provider-level incentives offered to encourage provider training and education?

$\boxtimes$	Yes. <b>Describe</b> , including any connections between the incentives
	and training relating to early language, literacy, pre-reading and
	early math concepts.

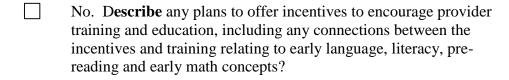
Licensing regulations require a number of training hours annually.. The CCR&R Network offers training to providers that link early language, literacy, prereading and early math concepts in order to meet licensing requirements. The Report Card and Star Quality Program evaluates providers in the component areas of Professional Development and the Program Assessment. The rating of the components provides a measure of early learning through assessing numerous items that relate to the providers' ability to provide a child/caregiver relationship

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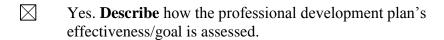
and an environment that promotes early language, literacy, pre-reading and early math concepts. A sufficient Report Card score entitles the provider to participate in the Star Quality Program. Those child care certificate providers that participate in the Star Quality Program earn Star Bonus payments calculated on the number of stars earned.

The Tennessee Early Childhood Training Alliance (TECTA) provides incentives in the form of tuition assistance (approximately 80% tuition for academic coursework at Tennessee Board of Regents (TBR) institutions) for early childhood program staff who have completed a TECTA Orientation course. The Child Development Associate (CDA) credentialing fee is funded by the Lead Agency through the TECTA system. Subsequent funding is available per semester for participants who have maintained passing grades in previous course work. A number of the Tennessee Board of Regents (TBR) two-year institutions offer an ECED Technical Certificate that includes six semester hours of course content related to early language, literacy, pre-reading and early math concepts. These courses articulate to the ECED A.A.S. degree that is available through the TBR community college system throughout the state.

TOPSTAR provides National Association of Family Child Care (NAFCC) fees for their mentors' and protégés' membership to promote leadership development and professionalism. As funds are available, TOPSTAR supports NAFCC accreditation fees for mentors or protégés interested in becoming NAFCC accredited. In addition, TOPSTAR pays stipends to mentors to compensate them for their time and travel and provides funds for substitute care for protégés.



h) As applicable, does the State assess the effectiveness of its professional development plan, including the achievement of any specified goals or desired outcomes?



Tennessee's system of professional development is engaged in continuous improvement and growth. The expected outcomes associated with this growth and are higher quality agencies as demonstrated by higher scores on agencies' evaluations and report cards. Additionally, the State is engaged in strategizing and planning a system to measure the child-level outcomes associated with all facets of our quality initiatives, to include professional development.

The effectiveness of the TECTA Program is assessed in several ways including an annual quality assurance review that is conducted by an outside evaluator. The evaluator produces a report that gives detail of process measures and outcome measures from information obtained through on-site visits to each of the nine TECTA contract institutions. This information is assembled in a report for Tennessee State University (TSU) Center of Excellence for Learning Sciences, grantee for TECTA funding by the Lead Agency. The annual report details the strengths and recommendations for each of the nine TECTA contract institutions. This information is used by the individual contract institutions and TECTA Management staff at TSU to develop improvement plans for future years.

Participants enrolled in TECTA orientation courses submit evaluations upon completion of the 30-hour course. These evaluations provide the opportunity for participants to give feedback regarding their perception of the relevance and effectiveness of the course content and materials as well as the effectiveness of instructional strategies and materials that were used. Participants also write a short paragraph describing the relevance of the course content to their practice as a teacher, caregiver or administrator. These anecdotal measures provide valuable insight into how the course impacts the integration of the course content into the participant's practices with children.

Each academic institution administers assessments of students enrolled in course work. Successful completion (with a passing grade) of previously TECTA funded course work must be documented with a current transcript for the individual to continue receiving TECTA tuition support. Students enrolled in academic institutions also complete course evaluations each semester. These evaluations focus primarily on the effectiveness of the instructor and provide the instructor and the department chairperson information that can be used for the development of faculty improvement plans when needed. This process ensures the quality of the academic program.

TOPSTAR uses accountability specialists to assure the protégés work is done and submitted correctly. Evaluation specialists are used to provide on-site visits to protégés that have completed the mentoring program. These visits establish an additional means of checks and balances to assure that participants are meeting program goals and receiving the assistance.

Accountability measures for the Child Care Resource and Referral Network include: an extensive Quality Assurance monitoring program for each of the ten local CCR&R sites; customer satisfaction surveys of TN-CCPT trainings, a detailed Trainer Analysis process to support the effectiveness of CCR&R staff conducting TN-CCPT trainings, and quarterly data analysis on productivity. All of these measures are examined against the outcomes from the Star Quality reports and Environment Rating Scale© assessment scores. All data is utilized to make modifications to the scope of services within the CCR&R Network and local sites to provide better professional development outcomes.

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No. <b>Describe</b> any plans to include assessments of the professional development plan's effectiveness/goal achievement.
i) Does the State assess the effectiveness of specific professional development initiatives or components?
Yes. <b>Describe</b> how specific professional development initiatives or components' effectiveness is assessed.
Two specific initiatives involving the TECTA Program that were assessed and implemented since the previous CCDF Plan are the Tennessee Early Learning Developmental Standards (TN-ELDS) Implementation Website project and the Tennessee Early Childhood Program Administrator Credential (TECPAC). The TN-ELDS Implementation Website will go live August, 2009 and the TECPAC was implemented statewide July, 2008.
TECTA is presently supporting the TN-ELDS Implementation Website project in the form of the creation of an interactive web portal which will allow providers from across the state to access training on the TN-ELDS information which will assist providers with mandatory child care`license training compliance (starting January 2010.) This is an opportunity for the state to introduce providers to current day technology and grant an awareness of other prospects within higher education. The interactive web portal is meant to be a building block as an alternative approach to education and training, as well as expandable as standards and expectations transform due to research within the early care and education. This piece of the TN-ELDS Implementation Project will undergo a rigid alpha and beta testing to assure quality and effectiveness. As a part of the testing DHS licensing, assessment, and contract staff will complete the online TN-ELDS program and provide constructive feedback.
The TECPAC project includes the use of these components: core statements of professional knowledge and practice as defined by the National Association for the Education of Young Children (NAEYC) and a portfolio collection of evidence produced during the documentation process. The portfolio reflects quality measurements of early childhood leadership and management in alignment with NAEYC, NAFCC and portions of the Program Administration Scale: Measuring Early Childhood Leadership and Management (Talan, T.N. & Bloom, P.J. (2004). Business Administration Scale for Family Child Care (unpublished).
No. <b>Describe</b> any plans to include assessments of specific professional development initiatives or components' effectiveness.

FOR THE FERIOD 10/1/09 – 9/30/11						
j) As applicable, does (or will) the State use assessment to help shape or revise its professional development plan?						
	Yes. <b>Describe</b> how assessment informs the professional development plan.					
See str	rategies described above.					
	No. <b>Describe</b> any plans to include assessment to inform the professional development plan.					

# PART 6 HEALTH AND SAFETY REQUIREMENTS FOR PROVIDERS

(Only the 50 States and the District of Columbia complete Part 6.)

The National Resource Center for Health and Safety in Child Care (NRCHSCC) of DHHS's Maternal and Child Health Bureau supports a comprehensive, current, on-line listing of the licensing and regulatory requirements for child care in the 50 States and the District of Columbia. Note: This database typically contains information on licensing requirements for meeting State or local law to operate (§98.40). This database does not contain registration or certification requirements specific only to participation in the CCDF program.

In lieu of requiring a State Lead Agency to provide information that is already publicly available, ACF accepts this compilation as accurately reflecting the States' licensing requirements.

The listing, which is maintained by the University of Colorado Health Sciences Center School of Nursing, is available on the World Wide Web at: http://nrc.uchsc.edu/.

CCDF regulations (§98.2) define the following categories of care:

- Center-based child care provider: Provider licensed or otherwise authorized to provide child care services for fewer than 24 hours per day per child in a nonresidential setting, unless care in excess of 24 hours is due to the nature of the parent(s)' work.
- Group home child care provider: Two or more individuals who provide child care services for fewer than 24 hours per day per child, in a private residence other than the child's residence, unless care in excess of 24 hours is due to the nature of the parent(s)' work.
- Family child care provider: One individual who provides child care services for fewer than 24 hours per day per child, as the sole caregiver, in a private residence other than the child's residence, unless care in excess of 24 hours is due to the nature of the parent(s)'s work.
- **In-home child care provider:** Individual who provides child care services in the child's own home.

<u>6.1</u>	Health and Safety Requirements for Center-Based Providers	(658E(c)(2)(F),	§98.41,
	§98.16(j))		

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6.1.1	State 1 certific check	aw per the N cation or regi "Yes" if cent	IRCHSCC's constration to reference ter-based prov	ompilation? er to their l iders simp	Note: So icensing relationships in the second secon	me States egulatory gister or a	process. Do not	
		Yes. Answ	er 6.1.2, skip (	6.1.3, and g	go to 6.2.			
			ibe which cent law and answ			re exemp	t from licensing	
		Girls Clubs the purpose requiremen	• •	nd that is c voluntary Girls Clul	ertified as standards	being in and man	-	
6.1.2 Have center licensing requirements as relates to staff-child ratios, grous staff training been modified since approval of the last State Plan? (§98 (3))					, ,			
	⊠ Septen		e changes are a recombined gro				chart was addea of each day.	ļ
hart 3 Allowabize and Adult: C			& Adult: Child R	atio Chart fo	r first/last hr	of each da	y only: Max. Group	ing
0					<u>15</u>		<u>20</u>	
.5-12 years						1:10		
-12 years						1:15		
-12 years						1:20		
		No.						
6.1.3	NRCH	ISCC's comp	are that is NOT pilation, the fol provided unde	llowing hea	alth and sa		eflected in irements apply to	)
		e prevention munizations)		f infectious	s disease (i	ncluding	age-appropriate	
		Immunizatio	on records on	file at child	d's school			
	b) Bu	ilding and pl	hysical premis	es safety				
		Requiremen	nt of Boys and	Girls Club	s of Amer	ica		

c) Health and safety training

Requirement of Boys and Girls Clubs of America

d) Other requirements for center-based child care services provided under the CCDF

#### 

6.2.1	Are all group home providers paid with CCDF funds subject to licensing under State law that is indicated in the NRCHSCC's compilation? <b>Note</b> : Some States use the term certification or registration to refer to their licensing regulatory process. Do not check "Yes" if group home child care providers simply must <i>register</i> or <i>be certified</i> to participate in the CCDF program separate from the State regulatory requirements.					
	Yes. Answer 6.2.2, skip 6.2.3, and go to 6.3.					
	No. <b>Describe</b> which group home providers are exempt from licensing under State law and answer 6.2.2 and 6.2.3.					
	N/A. Group home child care is not a category of care in this State. Skip to Question 6.3.1					
6.2.2	Have group home licensing requirements that relate to staff-child ratios, group size, or staff training been modified since the approval of the last State Plan? (§98.41(a)(2) & (3))					
	Yes, and the changes are as follows:					
	No.					
6.2.3	For group home care that is NOT licensed, and therefore not reflected in NRCHSCC's compilation, the following health and safety requirements apply to child care services provided under the CCDF for:					
	a) The prevention and control of infectious disease (including age-appropriate immunizations)					
	b) Building and physical premises safety					
	c) Health and safety training					
	d) Other requirements for group home child care services provided under the CCDF					

6.3	Health and Safety Requirements for Family Child Care Providers (658E(c)(2)(F),						
	§§98.41, 98.16(j))						
	6.3.1	Are all <u>family</u> child care providers paid with CCDF funds subject to licensing under State law that is indicated in the NRCHSCC's compilation? <b>Note</b> : Some States use the term certification or registration to refer to their licensing regulatory process. Do not check "Yes" if family child care providers simply must <i>register</i> or <i>be certified</i> to participate in the CCDF program separate from the State regulatory requirements.					
		Yes. Answer 6.3.2, skip 6.3.3, and go to 6.4.					
		No. <b>Describe</b> which family child care providers are exempt from licensing under State law and answer 6.3.2 and 6.3.3. <i>May care for four (4) unrelated children.</i>					
	6.3.2	Have family child care provider requirements that relate to staff-child ratios, group size, or staff training been modified since the approval of the last State Plan? (§98.41(a)(2) & (3))					
		Yes, and the changes are as follows:					
		⊠ No.					
	6.3.3	For family care that is NOT licensed, and therefore not reflected in NRCHSCC's compilation, the following health and safety requirements apply to child care services provided under the CCDF for:					
a) The prevention and control of infectious disease (including age-apprimmunizations)							
b) Building and physical premises safety							
		c) Health and safety training					
		d) Other requirements for family child care services provided under the CCDF					
		The Lead Agency conducts an initial home visit on all new enrolling (non-licensed unregulated) providers within 30 days of the application date. The home visit includes a:					
<ul> <li>Visual inspection;</li> <li>Count of the children in the home; and</li> <li>Compliance review of the Health and Safety Checklist form items.</li> <li>A new home visit will be made when an unregulated provider moves to a new home.</li> </ul>							

## **6.4** Health and Safety Requirements for In-Home Child Care Providers (658E(c)(2)(F), §§98.41, 98.16(j))

**Note**: Before responding to Question 6.4.1, **check** the NRCHSCC's compilation of licensing requirements to verify if **in-home child care** as defined by CCDF and your State is covered. If not, **check** no for 6.4.1. Do not check "Yes" if in-home child care providers simply must *register* or *be certified* to participate in the CCDF program separate from the State regulatory requirements.

6.4.1	Are all <u>in-home</u> child care providers paid with CCDF funds subject to licensing under the State law reflected in the NRCHSCC's compilation?					
	Yes. Answer 6.4.2, skip 6.4.3, and go to 6.5.					
	No. <b>Describe</b> which in-home child care providers are exempt from licensing under State law and answer 6.4.2 and 6.4.3.					
	Unlicensed providers will not be paid for more than four children.					
6.4.2	Have in-home health and safety requirements that relate to staff-child ratios, group size, or training been modified since the approval of the last State Plan? (§98.41(a)(2) & (3))					
	Yes, and the changes are as follows:					
	⊠ No.					
6.4.3	For in-home care that is NOT licensed, and therefore not reflected in NRCHSCC's compilation, the following health and safety requirements apply to child care services provided under the CCDF for:					
	a) The prevention and control of infectious disease (including age-appropriate immunizations)					
	b) Building and physical premises safety					
	c) Health and safety training					
	d) Other requirements for family services provided under the CCDF					

### **6.5** Exemptions to Health and Safety Requirements

At Lead Agency option, the following relatives: grandparents, great grandparents, aunts, uncles, or siblings (who live in a separate residence from the child in care) may be exempted from health and safety requirements. (658P(4)(B), §98.41(a)(1)(ii)(A))

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	Indicate the Lead	d Ag	ency's policy regarding these relative providers:
	sections 6 different r All relativ Some or a requireme	5.1 - 6 requive pro all re ents f	oviders are subject to the same requirements as described in 6.4 above, as appropriate; there are <b>no exemptions</b> for relatives or rements for them.  oviders are <b>exempt</b> from <u>all</u> health and safety requirements. Italiative providers are subject to <u>different</u> health and safety from those described in sections 6.1 - 6.4. The following a) the requirements and b) identifies the relatives they apply to:
	& Safety Checkli safety requiremen	<b>ist.</b> I nts fo	d Attachment Part 3.1.1, Unregulated Child Care Provider Health tems 2, 4, 6, and 9 of the checklist indicate different health and or care being provided by an immediate relative. The definition of located in Appendix 2, Eligibility and Priority Terminology.
6.6	<b>Enforcement of</b>	Heal	th and Safety Requirements
	child care provide applicable health	ers of	the cy is required to certify that procedures are in effect to ensure that if services for which assistance is provided comply with all safety requirements. (658E(c)(2)(E), §§98.40(a)(2), 98.41(d)) and safety requirements are effectively enforced, including at a
			re providers subject to <u>routine</u> unannounced visits (i.e., not the purpose of complaint investigation or issuance/renewal of a
			Yes, and <b>indicate</b> the provider categories subject to routine unannounced visits and the frequency of those visits:
			Licensed Family, Group and Center child care providers are subject to unannounced visits. The number of unannounced visits an agency receives is determined according to the Report Card and Star Quality Program "star status." New agencies and agencies not eligible for stars receive six unannounced visits per licensing year. One star agencies receive five unannounced visits per licensing year. Two and three star agencies receive a minimum of four unannounced visits per licensing year.
			No.
	b) Are chi	ild ca	are providers subject to background checks?
			Yes, and <b>indicate</b> the types of providers subject to background checks and when such checks are conducted:

	Only licensed Family, Group and Center providers are subject to criminal background checks.			
	No.			
occur while a	ate require that child care providers report serious injuries that child is in care? (Serious injuries are defined as injuries requiring nent by a doctor, nurse, dentist, or other medical professional.)			
	Yes, and <b>describe</b> the State's reporting requirements and how such injuries are tracked (if applicable):			
	Serious injuries, including but not limited to, massive bleeding, broken bones, head injuries, possible internal injury, etc. shall be reported to the parent immediately to arrange for emergency treatment. Incidents, accidents and injuries shall be documented and filed in the child's record.			
	No.			
d) Describe any other methods used to ensure that health and safety requirements are effectively enforced:				
Fire Inspections, Environmental Inspections and Immunizations Review				
Exemptions from In	nmunization Requirements			
immunized, and that incorporate (by refere	children receiving services under the CCDF are age-appropriately the health and safety provisions regarding immunizations ence or otherwise) the latest recommendations for childhood State public health agency. (§98.41(a)(1))			
The State exempts the	e following children from immunization (check all that apply):			
grandp Childr Childr	en who are cared for by relatives (defined as grandparents, great parents, siblings (if living in a separate residence), aunts and uncles). en who receive care in their own homes. en whose parents object to immunization on religious grounds. en whose medical condition contraindicates immunization.			

<u>6.7</u>

# PART 7 HEALTH AND SAFETY REQUIREMENTS IN THE TERRITORIES

(Only the Territories complete Part 7)

CCDF regulations (§98.2) define the following categories of care:

- Center-based care: Provider licensed or otherwise authorized to provide child care services for fewer than 24 hours per day per child in a non-residential setting, unless care in excess of 24 hours is due to the nature of the parent(s)' work.
- Group home child care provider: Two or more individuals who provide child care services for fewer than 24 hours per day per child, in a private residence other than the child's residence, unless care in excess of 24 hours is due to the nature of the parent(s)' work.
- Family child care provider: One individual who provides child care services for fewer than 24 hours per day per child, as the sole caregiver, in a private residence other than the child's residence, unless care in excess of 24 hours is due to the nature of the parent(s)'s work.
- **In-home child care provider:** Individual who provides child care services in the child's own home.

## 7.1 Health and Safety Requirements for Center-Based Providers in the Territories (658E(c)(2)(F), §98.41(a), §98.16(j))

- 7.1.1 For all <u>center-based</u> care, the following health and safety requirements apply to child care services provided under the CCDF for:
  - a) The prevention and control of infectious disease (including age-appropriate immunizations)
  - b) Building and physical premises safety
  - c) Health and safety training
  - d) Other requirements for child care services provided under the CCDF

## **7.2** Health and Safety Requirements for Group Home Child Care Providers in the Territories (658E(c)(2)(F), §98.41(a), §98.16(j))

7.2.1 For all group home child care, the following health and safety requirements apply to child care services provided under the CCDF for:

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- a) The prevention and control of infectious disease (including age-appropriate immunizations)
- b) Building and physical premises safety
- c) Health and safety training
- d) Other requirements for child care services provided under the CCDF

## **7.3** Health and Safety Requirements for Family Child Care Providers in the Territories (658E(c)(2)(F), §98.41(a), §98.16(j))

- 7.3.1 For all <u>family child care</u>, the following health and safety requirements apply to child care services provided under the CCDF for:
  - a) The prevention and control of infectious disease (including age-appropriate immunizations)
  - b) Building and physical premises safety
  - c) Health and safety training
  - d) Other requirements for child care services provided under the CCDF

## 7.4 Health and Safety Requirements for In-Home Child Care Providers in the Territories (658E(c)(2)(F), §98.41(a), §98.16(j))

- **7.4.1** For all <u>in-home</u> care, the following health and safety requirements apply to child care services provided under the CCDF for:
  - a) The prevention and control of infectious disease (including age-appropriate immunizations)
  - b) Building and physical premises safety
  - c) Health and safety training
  - d) Other requirements for child care services provided under the CCDF

#### 7.5 Exemptions to Territorial Health and Safety Requirements

At Lead Agency option, the following relatives may be exempted from health and safety requirements: grandparents, great grandparents, aunts, uncles, or siblings (who live in a separate residence from the child in care). (658P(4)(B), §98.41(a)(1)(ii)(A)). Indicate the Lead Agency's policy regarding these relative providers:

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		sections 7.1 - different requ All relative pr Some or all re requirements	roviders are subject to the same requirements as described in 7.4 above, as appropriate; there are <b>no exemptions</b> for relatives or irements for them. roviders are <b>exempt</b> from <u>all</u> health and safety requirements. The elative providers are subject to <u>different</u> health and safety from those described in sections 7.1 - 7.4 and the following the different requirements and the relatives they apply to:
7.6	Enfor	cement of Ter	ritorial Health and Safety Requirements
	child o	care providers of able health and <b>ibe</b> how health	ncy is required to certify that procedures are in effect to ensure that of services for which assistance is provided comply with all safety requirements. (658E(c)(2)(E), §§98.40(a)(2), 98.41(d)) and safety requirements are effectively enforced, including at a
			are providers subject to <u>routine</u> unannounced visits (i.e., not or the purpose of complaint investigation or issuance/renewal of a
			Yes, and <b>indicate</b> the provider categories subject to routine unannounced visits and the frequency of those visits:
			No.
		b) Are child c	are providers subject to background checks?
			Yes, and <b>indicate</b> the types of providers subject to background checks and when such checks are conducted:
			No.
		occur while a	erritory require that child care providers report serious injuries that child is in care? (Serious injuries are defined as injuries requiring nent by a doctor, nurse, dentist, or other medical professional.)
			Yes, and <b>describe</b> the Territory's reporting requirements and how such injuries are tracked (if applicable):
			No.
		d) Describe ar are effectively	ny other methods used to ensure that health and safety requirements a enforced:

#### 7.7 **Exemptions from Territorial Immunization Requirements**

The Territory assures that children receiving services under the CCDF are ageappropriately immunized, and that the health and safety provisions regarding immunizations incorporate (by reference or otherwise) the latest recommendations for childhood immunizations of the Territorial public health agency. (§98.41(a)(1)) The Territory exempts the following children from immunization (check all that apply): Children who are cared for by relatives (defined as grandparents, great grandparents, siblings (if living in a separate residence), aunts and uncles). Children who receive care in their own homes. Children whose parents object to immunization on religious grounds. Children whose medical condition contraindicates immunization.

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# APPENDIX 1 CCDF PROGRAM ASSURANCES AND CERTIFICATIONS

The Lead Agency, named in Part 1 of this Plan, assures (§98.15) that:

- (1) upon approval, it will have in effect a program that complies with the provisions of the Plan printed herein, and is administered in accordance with the Child Care and Development Block Grant Act of 1990 as amended, Section 418 of the Social Security Act, and all other applicable Federal laws and regulations. (658D(b), 658E(a))
- the parent(s) of each eligible child within the State who receives or is offered child care services for which financial assistance is provided is given the option either to enroll such child with a child care provider that has a grant or contract for the provision of the service; or to receive a child care certificate. (658E(c)(2)(A)(i))
- in cases in which the parent(s) elects to enroll the child with a provider that has a grant or contract with the Lead Agency, the child will be enrolled with the eligible provider selected by the parent to the maximum extent practicable. (658E(c)(2)(A)(ii))
- (4) the child care certificate offered to parents shall be of a value commensurate with the subsidy value of child care services provided under a grant or contract. (658E(c)(2)(A)(iii))
- with respect to State and local regulatory requirements, health and safety requirements, payment rates, and registration requirements, State or local rules, procedures or other requirements promulgated for the purpose of the Child Care and Development Fund will not significantly restrict parental choice among categories of care or types of providers. (658E(c)(2)(A), §98.15(p), §98.30(g), §98.40(b)(2), §98.41(b), §98.43(c), §98.45(d))
- that children receiving services under the CCDF are age-appropriately immunized, and that the health and safety provisions regarding immunizations incorporate (by reference or otherwise) the latest recommendation for childhood immunizations of the State public health agency. (§98.41(a)(1))
- (7) that CCDF Discretionary funds are used to supplement, not supplant, State general revenue funds for child care assistance for low-income families. (P.L. 109-149)

The Lead Agency also certifies that:

(1) it has procedures in place to ensure that providers of child care services for which assistance is provided under the Child Care and Development Fund afford parents unlimited access to their children and to the providers caring for their children during the normal hours of operations and whenever such children are in the care of such providers. (658E(c)(2)(B))

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- it maintains a record of substantiated parental complaints and makes information regarding such complaints available to the public on request. (658E(c)(2)(C))
- it will collect and disseminate to parents of eligible children and the general public consumer education information that will promote informed child care choices. (658E(c)(2)(D))
- (4) it has in effect licensing requirements applicable to child care services provided in the State. (658E(c)(2)(E))
- (5) there are in effect within the State (or other area served by the Lead Agency), under State or local law, requirements designed to protect the health and safety of children; these requirements are applicable to child care providers that provide services for which assistance is made available under the Child Care and Development Fund. (658E(c)(2)(E))
- (6) procedures are in effect to ensure that child care providers of services for which assistance is provided under the Child Care and Development Fund comply with all applicable State or local health and safety requirements. (658E(c)(2)(G))
- (7) payment rates under the Child Care and Development Fund for the provision of child care services are sufficient to ensure equal access for eligible children to comparable child care services in the State or sub-State area that are provided to children whose parents are not eligible to receive assistance under this program or under any other Federal or State child care assistance programs. (658E(c)(4)(A))

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### APPENDIX 2 ELIGIBILITY AND PRIORITY TERMINOLOGY

For purposes of determining eligibility and/or priority for CCDF-funded child care services, Lead Agencies must **define** the following *italicized* terms. (658P, 658E(c)(3)(B))

- in loco parentis For Families First, Transitional, and At-Risk Child Care programs, caretaker must be within the 5<sup>th</sup> degree of relationship to the child. Included as eligible "relatives" are those related to the child by half-blood, step-related, legally adoptive parents; and, the blood relations of these persons, legal spouses of any of these persons even though the marriage may have been terminated by death or by divorce. For Low Income Child Care, relatives within the 5<sup>th</sup> degree of relationship and legal guardians who are not within the 5<sup>th</sup> degree of relationship may act as a caretaker.
- physical or mental incapacity (if the Lead Agency provides such services to children age 13 and older) For the purpose of determining if a child 13 years of age or older is eligible to receive child care assistance, the threshold is a doctor's statement verifying the child is either mentally or physically unable to care for him/herself.
- protective services Not applicable. Tennessee uses the Social Services Block Grant to fund child care assistance for foster children in state custody. The Lead Agency for that program is the Department of Children's Services.
- residing with For all programs, "care and control" rather than legal guardianship determines the adult that serves as a child's caretaker.
- **special needs child** The Lead Agency will serve children ages 13-19 from qualifying families provided the child is physically or mentally incapable of self-care.
- *very low income* The Lead Agency gives priority to participants in the Families First (TANF) program.
- **List and define** any additional terminology related to conditions of eligibility and/or priority established by the Lead Agency:

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attending (a job or educational program; include minimum hours if applicable) — Enrolled in and attending college in a training or educational program and studying related to attending (1 hour study time is granted for each credit hour). For Families First child care, students must be considered full-time by the institution (12 credit hours) for other programs; part-time attendance is allowed if combined with work to meet program qualifications.

*job training and educational program* – Workforce Investment Agency (WIA) program (prior referred to as the "Job Training Participation Act agency or JTPA or as a Private Industry Council [PIC] agency), or a program at a state higher education institution (such as a community college), Technology Center, or Board of Regents school.

working (including hours if applicable) – For Transitional Child Care, At-Risk Child Care, and Low-Income Child Care, 40 hours per week of paid employment at or above minimum wage is required, but 30 hours or more per week may be allowed if that job is considered "full-time" or is the best situation possible given the local economic conditions.

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## Attachment Appendix 2 Families First – Income Standards Effective 7/1/05

Additional terminology related to conditions of eligibility or priority established by the Lead Agency:

**Teen Parents:** all teen parents in school applying for child care assistance must maintain satisfactory attendance and academic progress.

Minimum Participation Effort: all non-TANF low-income parents or caretakers applying for child care assistance must: -Maintain full-time employment, education or a mix thereof: and,-Must earn a gross income that equals minimum wage or above for the number of hours worked.

**Post-secondary Education:** all non-TANF low-income parents or caretakers applying for child care assistance who are in post-secondary education or training must make satisfactory progress and participate in activities for 40 hours per week which combine education with work or other approved activities.

Caretakers: usually a relative within the fifth degree of blood relationship, or a legal guardian, eligible for and in need of child care assistance and who has care and control of an eligible child.

Immediate Relative: a relative caretaker who is a brother or sister or parent, grandparent or great-grandparent or adult child to the parent and who has care and control of the eligible child.

#### APPENDIX 3: ADDITIONAL CERTIFICATIONS

CCDF Regulations 45 CFR §98.13(b)(2)-(6) require the following certifications.

- 1. Assurance of compliance with Title VI of the Civil Rights Act of 1964: <a href="http://www.hhs.gov/ocr/ps690.pdf">http://www.hhs.gov/ocr/ps690.pdf</a>
- **2. Certification regarding debarment:** http://www.acf.hhs.gov/programs/ofs/grants/debar.htm
- **3. Definitions for use with certification of debarment:** <a href="http://www.acf.hhs.gov/programs/ofs/grants/debar.htm">http://www.acf.hhs.gov/programs/ofs/grants/debar.htm</a>
- **4.** HHS certification regarding drug-free workplace requirements: <a href="http://www.acf.hhs.gov/programs/ofs/grants/drugfree.htm">http://www.acf.hhs.gov/programs/ofs/grants/drugfree.htm</a>
- 5. Certification of Compliance with the Pro-Children Act of 1994: http://www.acf.hhs.gov/programs/ofs/grants/tobacco.htm
- **6. Certification regarding lobbying:** <a href="http://www.acf.hhs.gov/programs/ofs/grants/lobby.htm">http://www.acf.hhs.gov/programs/ofs/grants/lobby.htm</a>

These certifications were obtained in the 1997 Plan and need not be collected again if there has been no change in Lead Agency. If the there has been a change in Lead Agency, these certifications must be completed and submitted with the Plan.

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### REQUIRED ATTACHMENTS

Attachment 2.1.2	Emergency Preparedness & Response Plan for Child Care & Early Childhood Programs
Attachment 2.2	Public Hearing Process
Attachment 3.1.1	Description of Child Care Services - Unregulated Child Care Provider Health & Safety Checklist
Attachment 3.2.1	Payment Rate for the Provision of Child Care
Attachment 3.2.3	Determining Child Care Market Rates in the State of Tennessee
Attachment 3.5.1	Parent Income Eligibility and Co-Pay Fee Table FY 2009/2010
Attachment 4.1.1	Application Process/Parental Choice
Attachment 4.3	Provider Agreement
Attachment 4.4	State TANF Plan of Operation
Attachment 5.2.1	Early Learning Guidelines and Professional Development Plans
Attachment 5.2.3	Early Learning Guidelines and Professional Development Plans

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Amended Effective: \_\_\_\_\_